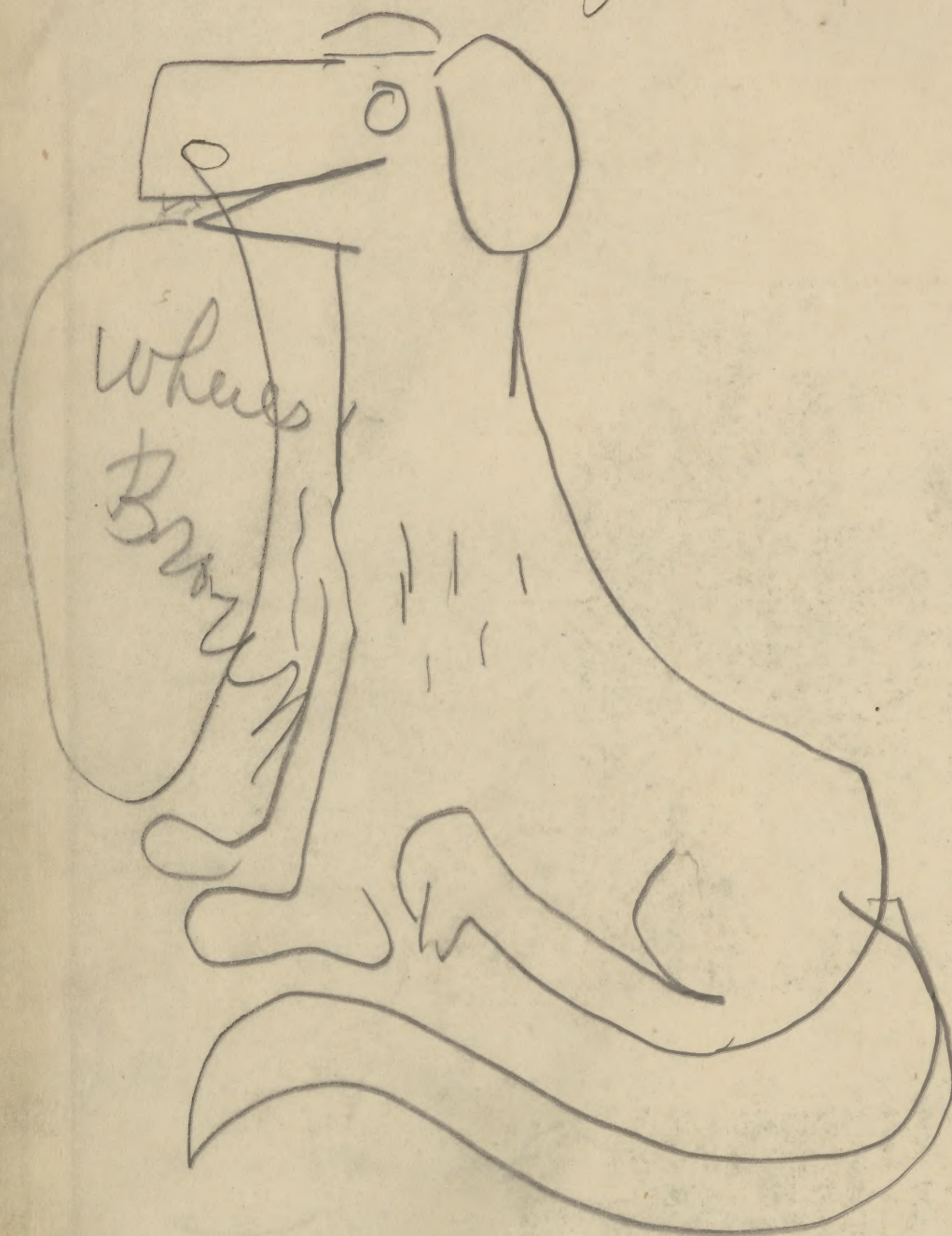
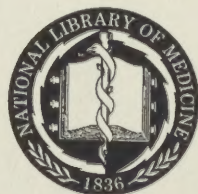


J. H. Brown. '05.
J. H. Brown 05.



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Gift of
Mrs. Robert K. Brown



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Therapeutics. (Prof. Friedman)

Typhoid
Fever.

First thing put the patient to bed and keep him there constantly & get up under no circumstances, keep a nurse by him continually, who shall administer food, medicine etc. Keep him perfectly quiet only move him about & change his position occasionally to avoid bedsores. When first symptoms appear give him alcohol, always watching the pulse. This is given in form of whiskey, Brandy or wines making them pleasant to take. Water is to drink.

Diet.

The Diet should be absolutely fluid throughout the sickness & for two days after the temperature has become normal. Milk is good, Bacteria Typhosa given well in Meat Broth, 'tho' it is recommended. Avoid any solids whatever in the Broth.

Chocolate is good, in form of drops or otherwise, to satisfy the hunger. Some give Soft Boiled Eggs.

There is no remedy for curing the disease other than nursing.

Some recipes recommended:

Recipe a Dilute HCl. & Phosphoric acid for antiseptic properties.

b. Acetone, one 10 grs. in pint of water & drink when wanted.

c. Sild = Salicylic acid + Carbolic acid, 4 to 10 grs. every 4 hrs.

d. Salicylic may be substituted for above as it does not affect the kidneys.

Quinine should not be used only at first to help diagnose the case by eliminating Malaria if fever does not subside in a few days.

Temp. During best week temperature ranges from 99.6
to 102.5. Second week is always highest being
from 102 to high as 103°.

Antipyretics should not be used.

Cold Bath is best treatment to be used when
temp reaches 103° the water used from 68 to 75°
body & extremities should be rubbed & cloth
towel on head.

In children opposed to the bath a pack may
be used or a sponge bath given.

In some cases Quayed is used externally
by rubbing 10 to 15 drops (dose) on the abdomen
in using this watch heart effects.

Acetarsolid may be used. Where there has
been no sleep for two or three nights a
sleep is required in the disease. Dose 1 to 3 gr.
for children.

If Heart Failure accompanies Strychnine
to 4 to 6 gr. may be used but don't use
Digitalis.

Diarrhea Many cases begin with diarrhea
while beginning with constipation is
not infrequent. For Diarrhea we use
opium in form of tincture & may be
used with Rectate of L.

R.

Rectate of Opium gr. x

Ab. Rectate Sol.

M. L. 30 x

One every 2 hrs.

A tablespoonful of Turpene may be used.

Turpene

Take hot water & add one teaspoonful turpene
oil in cloth & lay over abdomen covering with
oil & seek to prevent excretion. Be sure of
imitation Turpene taken internally 10 to 15
Drops.

Syrup of Iodine with Tincture of Asafetida
every 2 hrs.

Extended Abdomen use Syllate of Esen
50 gr. every 2 hrs.

Constipation.

Calomel 4 gr. every 4 hr. 4 gr. generally act
within 2 hrs. Use mild cathartic

Hemorrhage of Esophagus

Use Iodine or cocaine with 1/2 rectified

Alcoholine Chloride in water.

Ergot in water

No. 1. Iodine acid

1 Alcohol p.s.

4th sol.

2. 1. Dilute sol. acid

Aqua Cinnamon p.s.

Syrup of Iodine every 2 hrs.

Apply rectified over Hemorrhage.

2. 2. rectified Iodine

Use of Br. of Iodine & Calomel

Compound Administered for sleep.

Opium good for Hysteria

2 gr. Hypodermic of Morphine

Prostration - Surgery -

In Prostration how to manage in. Still
ever suddenly broken.

2. 3. Sours.

Remove pressure by water in bag.
Wash with Alcohol

Dr. Lister's powder with equal parts
of Bide of Zinc

Concave dent

Draw out of bag till 2 days after
temperature has become normal

Dry Mouth, tongue & bad taste.

Brush teeth every day and wash the mouth with an antiseptic solution. Boracic Acid is good.

Equal parts of glycerine & water plus a few drops of lemon juice relieve dryness & bad taste.

Bronchitis is a complication the Bronchial rales may be heard over front & back of Lungs.

Pneumonia is a serious complication & often hypostatic results from keeping the patient in one position.

Pneumonia should be treated just the same as if no typhoid was present & where typhoid complicates Pneumonia Vicarsa.

Treatment should begin with stimulation from the start.

A relapse in Typhoid is not a serious thing & should be treated the same as in the beginning. Relapse is due to insufficient diet.

Malaria

Where Quinine can not be given any other way it may be made as a suppository giving 16 to 20 gr. per Rectum every 3, 4 or 5 hrs. given with Cocoa Butter.

Arsenic is said to be an adjuvant in when a tonic is wanted. Maximum dose is 30 gr. given as pill or powder & usually with Iron.

R	Adult	Howland's Solution
Quinine Sulphate	3 i	given Children
Arsenic acid	gr. i	2 or 4 drops
Iron sulphate / Iron	3 i	which is
24 gr. pill 20 xxx		34 gr. arsenic ac.

Malaria Fevers.

A specific treatment for Malaria is Quinine. In form of Sulphate. Bi. Sulphate not soluble. Murate still more soluble.

It is given in Solution, Pill, Capsule, Powder.

It is absorbed in the Stomach & should be given that way & not in any other for it to pass that.

Give in solution when possible. Quinine in good to disguise the taste.

R

for Children

Quinine Sulphate	℥ i
Comp. Aconitid Powder	gr. xv.
Quinine	℥ ii
Spt. Sassafras	℥ i
Shake well.	

Dilute H_2SO_4 + Quinine may be given.

Calomel is used for a purgative.

R

for Children - Continuation

Quinine Bi. Sulphate	℥ i ss
Lacaline	
Spts. Turpentine	
Syr. Rub. & water some	℥ i

The quinine Sulphate & Bi. Sulphate is irritating when hypodermically & Carbonate of quinine, to 3 gr. is injected in some cases.

R Children.

Eugénine gr. X.

Salipetine gr. XX.

Mft. powder M. V.

Sig. One powder every 2 hours.

† (This has little taste).

For grown people where taste
does not bother.

R Adults

Quinine Sulphate ʒ ii

Comp. Acetanilid Powder ʒ ii

Mft. Capsules M. XX.

Sig. 2 Capsules every 4 hrs.

In cases where the disease
can't be cured a change to
a high altitude is beneficial

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Cerebro Spinal fever.

Epidemic in New York in 1841
Success in treatment was poor.
Extraction of fluid from lumbar
region between the vertebrae with
a sharp needle & cover wound with
an antiseptic bandage.

Hyphtheria Antitoxin may be tried
was successful in one case by Friedman
6000 units being given to a child.

Those accompanying the disease, Delirium,
restlessness, want of sleep etc.
for this see guide
for adult.

Chloral Hydrate	℥ ii
Bromide Potassium	℥ ii
Syr. Kamoni	℥ ii
Aqua Distil.	q.s. ℥ i℥
Tablespoonful every 3 hrs.	

Cold applications to the head &
spine are beneficial.

An ice bag could cover the head
& apply.

Grippe. Introduced in 1889.
They come on as a catarrh. there
is localness of joints & patient feels
very weak & extreme headache & sore
throat which is of a characteristic
red colour.

The patient should be put to bed
immediately & apply cold to the
head.

Cold tar preparations are used here
& Acetanilid 4 gr. (grown person) every
4 hrs.

Rx adult.

Salol.

Pute Acetanilid Comp. aa 3 ii

Mf. Pute No. 2 one every 4 hrs.

Mf. Capsule. No. 22 two h. " "

Doses of Salol are used by some but
quinine is little used.

Accompanying Grippe we have sore
throat - Purplish red & may have
a membrane resembling Diphtheria.

Bergate of Soda best treatment
for throat, give large doses in solution
It is more of an antiseptic wash.

Rx Bergate of Soda 3 ii

Glyc. Tubul 3 i

Aqua. Ros. q. s. 3 ii

Tablespoonful every 4 hrs.

Gargles are used H_2O_2 irritates
if not dilute.

Rx - any thing

For Bronchitis give a Cough mixture
containing Bergate of Soda

7

Bicarbonate of Soda $\mathfrak{f} \text{ III}$
 Syr. White Pine Expectorant $\mathfrak{f} \text{ i}$
 Syr. Potash
 Mucilage $\mathfrak{f} \text{ i}$
 Aqua Ros. $\mathfrak{f} \text{ II}$

Give tonic containing Strychnine
 as rec.

For Ear trouble consult a specialist
 for the best remedy to be used
 & operation necessary. There is a long process

Cardiac Weakness. Strychnine 2 times a day
 Compound Syr. Hydrophosphate
 For Anemic and Poor & some
 weakness of the South.

Croupous

Pneumonia

Bicarbonate of Soda in large doses
 Tonic of Strychnine

There is no specific treatment.

Patient should have absolute rest.

& hot applications & cold action is same

A glycerine Poultice made by taking
 a large piece of cotton & adding hot

water & few drops of glycerine & cover
 with wetted silk & cloth makes a

poultice & keep on for 5 days & remove
 with alcohol & turpentine.

Many deaths are due to heart failure
 so stimulating treatment is recommended.

Critical day is 5th or 6th day after chill.

& should be prepared for it & after

crises patient is without danger.

A hypodermic injection is good for

the severe pain & will relieve

the dyspnea

R Glycyrrhine Sulphate gr. 2.
 Lig. Ammon. Acetatum ʒi
 (Per. Phos)

Syr. Malt

Aqua Ros. ss.

Mix. Sub. Sy. 1 Teaspoon 3 times
 every 4 hrs. given throughout disease.
 Hypoxia is treated by inhalations
 of Oxygen.

Don't give Antipyretics for fever
 treat by cold applications.
 Stridor is treated in same way
 Cod Liver Oil is good in that it contains
 fat & small quantities of Iodine.

Diphtheria.

An exceedingly contagious Disease, &
 does not occur in children alone.

Immediately isolate the patient with
 nurse & other children should be sent
 away or immunized by 500 units of
 Antitoxin.

First the attack is localized to throat &
 tonsils & ʒr of Chloride of Pot. is used.
 for ordinary sore throat:

R Kali Chlorat Dissolve in H₂O.

Kali Chlorat ʒi

Lig. Ferrous Chlor M xxx.

Glycerine

Aqua Rosi

" Ferriol Aa ʒi

Teaspoonful every 3 hrs.

Swabbing throat & spraying is
 recommended.

R. Hydrog Bi Chlor gr. i

Hydrogen Peroxide ʒ ii

Aqua Distil ʒ vi

Mix. Sub. 1 Teaspoonful every 4 hrs.
 Use as spray may be given internally.

H₂O₂ May be used alone.
gargles do little good only to keep
mouth clean.

Antitoxin specific treatment &
sooner the better.

Give immediately 3000 units & wait
15 or 24 hrs. if necessary repeat.

Inject in right side of back away
from sore.

Give plenty of Whisky

Laryngeal
Diphtheria

Laryngeal Diph. : Membranous Croup

Give 6000 units Watch closely & give
again if needed in 6 hrs.

Intubation is used.

Tracheotomy not used any more.

Erythema may follow antitoxin &
will gradually disappear.

Give Pebrin 56 to 76 gr. per day

Paralysis may follow & patient
~~must~~ ^{not} be kept in bed quite a time
to prevent this.

Fever Stage (Scarlet Fever).

No Antipyretics, use Cold Water.

Itching of skin. Camphorated Oil.

Carbolated Vaseline with about 1% oil.

This also prevents Extension of Contagion.
in keeping these brown like substance from
flying around. All Books etc should be
destroyed.

Sore Throat Complicated. Red Throat, membranes
may be diphtheritic.

Treated as Ordinary Sore Throat.

Tr. & Muriate of Potash 10 grs for each year

Rx Codii Benzoin 3^{iv}

Syr. Simp. 3^{iv}

Aqua Dist 40 3^{iv}

Mf. Sol.

teaspoonful every 3 hrs.

Glands may swell. Iodine may be used
externally. Milk - Starch is antiseptic.

Ang-Todine

Ang Potrate

aa 3 ss.

Syr. Externally

When Pus occurs, open up.

Acute Inflamm. of Glands of Throat.

Hot application or syringe.

Open for Pus.

Inflammation of Kidney at time of Desquamation
be watched well.

Urine full of Albumen

Urine should be kept warm

Give no meat or eggs or nitrogenous food.

In this case little urine is passed, give a

Dr. ext. plenty of water

& Kali Citrat 3^{iv}

Syr. Lemonis 3^{iv}

Aqua Dist 40 3^{iv}

Mf. Sol. 3^{iv}

R. Chert 5 grains 100.

Syr. Ferri Sulfate

Talkies 10 drops.

5 drops in water every 4 hrs.

6 or 8 inches may take during Desquamation.

Artthritis: Cold or hot application.

Detached externally.

R. Sodii Sulfate 7 3 III

Syr. Simplicis

Aqua Dis. 95. 3 IV

Mix. Sol. Transformed every 4 hrs.

Nov. 2, '05 Measles - eruption over.

eruption accompanied by catarrh.

Exanthematic eruption - Cough accompanies.

Keep in dark room.

Cough mixture which is good expectorant to relieve cough.

Brown mixture cough.

Belladonna where there is coughed up.

Bromides & Chlorides are good.

Chloroform used as sedative in cough mixtures.

Anemia good Stimulating Cough mixture

Anemia Murinate " " - expectorant.

Dry Irritating cough in Measles:

R. Sodii Benzoate 3 7 (20)

Syr. Gellae Comp 3 55

Syr. Toluat 3 11

Aqua Dis. 95. 3 15

Transfused 2 hrs.

For relative Cough

Brown mixture.

Comp. Syr. of Calverice

13

Ammonio Muriat 3 35
Tr. Sp. Camp. ph. 2 35
Syr. I. mega 13 1
Aqua Dis. q.s. 1 1
Taste every 2 hrs
Syr. of W. Pine Expect. ant

Stimulation & sedation
R. Carb Ammonium Adult 3
Mol. hin Sulp. 3 i
Glycerine 3 i
Syr. Pina. Vera 3 i
Aqua Dis 3 II
Till s.p. 3 min.

To hasten Expectoration

R

Heroin Muriat gr. i
Kali Iodid. 3 i
Syr. Pina. Vera 3 i
Glycerine 3 i
Aqua Dis gr. 3 II
Till s.p. every 2 hrs
Cough exp. in cold Cough Muriat.
Dissol.

Camp. Tr. Sp. — Pragone —
Dissol.

R

Bismuth Subnit. gr. ss
Puta Dover gr. I
Lact. Septin gr. ss
Mife. fruits No II
Every 3 or 4 hrs.

Quinine p. 1

Not serious. Suffering -

Both with Hot water with Carbolic acid.

Morphine 4 grs. for adult, outer part
of arm not injurious. Be careful
20 gr. of atropine given along.

Small
Fox

Vaccination - 1796 - Jenner -

Should be vaccinated at 3 months must
be successful, & repeat every 6 or 7 years

Pain in Back from severe head ache.

No Specific.

symptomatic. No application for
Black ache etc.

Hot Water 100°. Carbolic Acid & eruptions.

Yellow
Fever.

sick, fever, slight jaundice, chills, Black vomit.
4 day Black vomit Death.

No Specific. Mosquito Carriers. Immune after 1.

Protect from Mosquito.

Treat Indications. Champagne,

Whooping
Cough.

Two stages to treat

Catarhal: cough mixture.

Convulsive Stage: Paroxysm occur frequently.

Do not cure about 6 weeks.

Perusside for external use

Pellodone & opium. Remove from heavy liquid.

1 to 6 ml. dose. Quinine produces action

see large doses. Remove of R. & H.

Allyl may make vomiting.

Chloral. at night.

Antipyrin in day.

Rx

Chills during day

Antipyrin

Hydrochloride

Ex. 10. Belladonna

Syr. Prunella Rose

Glycerin

Ess. Oil

Ess. Oil

3 53

3 11 51

3 11

3 1

3 1

3 1

3 1

R. 570.000.

Chloro hydric. 7 11

Waterbury Conn. 21. 1890

Exp. Total 27

29. Dec. 1974

Therapeutic at 1-2 mm repeat 10 times.

Erysipelas. Inflamm. of skin external injury
subsides in about 12 days
specific Murrat's Tro. & Iron. till
interfere with indigestion
Give in water thru tube

Doth as antipyretic, ~~same may~~
be used. In typhoid toxin same
sufficient. Creosote on Sugar
4 gr Morphine.

g. Trichloroacetic acid for warts,
(place warted on the warts,
Vinegar for skin psoriasis)

External Ambulatory left position.
Application: Cathol. Can. account of 1812-1813.

H. Ex. Agent

Use Diluted alcohol with vasoline
Cranberry pulp ice

Internal Mo. Specific to clean nose / I am not
In. I cross with water three times
wash teeth with Bicarb Soda.

Disease lasts 10 to 14 days.

Cold Applications. for suppurative skin
and antiseptic washes.

Tetanus Germ Disease, introduced thru minor wound.
find injury enlarge in + take out a
give Potassium Iodide ^{6000 units} in large dose
repeat in 4 hrs. give rest, give calomel
or Phen. to prevent convulsions.
Dysentery of Carbolic Acid $\frac{1}{2}$ to $\frac{1}{4}$ gr. every
hr. or 4 gr. in 24 hrs.

Nov. 21/05 Cherry wine with Iron it contains no Tannic A.
 " " good in Convalescence.

Moselle wine has little Sugar for Diabetes
 Tokay sweet for ascorbic.

Cherry 30 Rum Distillation Molasses.
 Port. 22 Gin " Juniper Berries
 Rhine 12 Beer from 1/2 Hops Barley
 Champagne 12

Acute

Articular

Rheumatism

Not certain about cause

Intense inflam of joints accompanied by high temp.

Put joint at rest by starch bandage.

Detached may be closed under bandage.

Salicylic Acid is Specific

administered in capsule or water.

Salicylate of Na. Tronlim 10m.

" " 15grs. 3 or 4 hrs.

It irritating to Stomach change.

Salicylic Acid or Salicylate may cause Deafness

Do. of K. or Na. for Chronic or tertiary Syphilis

Abuse.

Calcium may cause Diarrhea

Poke root has been used.

Give Antipyretics for pain & fever. Salicylates
 usually do.

Application of heat for pain.

Emment no good.

Aspirin contains Salicylic Acid.

Rx.

Acidi Salicyl. - gr. 100.

Mft. Capsules No. XX

3 Capsules after eating.

Rx Sodii Salicyl. 3 IV

Tr. Phytolacae

Vicin Colchici

Sig Amorisae Acet

Spt. Natri. Dulc. aa 3 i

Syr. Saponis.

Q. S. 3 VIII

tablespoonful every 3 hrs.

1 or 2 gr. / Morphine may be added to foregoing will relieve pain & prevent bad action of Diarrhea.

Strontium Sal. is less irritating.

Iodide of Iron when Disease is drawn out.

Nov. 23, 05

Mumps

Mumps on one or both sides swelling behind ear contagious, fever is high.

Secondary inflammation in testis & should be treated as any abscess.

Apply lotion of Pot. Subacetate, 1 lb. water fl. Oz.

Camphorated oil on cotton for Mumps.

Disease runs course & gets well.

Diabetes Mellitus

Large amt. Sugar in urine of nervous people.

Large amt. urine with high Sp. Grav.

Exclude foods which are sugar or are transformed to grape sugar.

Dietary List: allow Soups or Broth?

Boiled Chicken, Roast Mutton, Veal, Turkey.

Fish all kinds in dressing containing no Eggs in any way.

Meats: fat beef, mutton, free from flour, Bread, potatoes, flour.

Farinaceous foods exclude entirely.

Vegetables - string Beans, Spinach, lettuce.

Chickens, Potatoes, Corn, Asparagus.

Beet tops, Cabbage.

Mushrooms, Cystis plant, Cauliflower, Radishes.

Beets.

Diet

Custards no sugar use saccharine or glucose, Jellies, Creams, Walnuts, Coconuts, Peanuts.

Drinks

Tea - Coffee pure water, milk.

Avoid Liqueur, Sugar, sweet, Starches.

Compound Salmol, rice Barley Rye.

Macaroni Tapioca Vermicelli Potatoes.

Pears, Apples, Currants, Leaf Currants
 Melons, fruits, puddings, jellies,
 fine Quince Jellies, No Honey jam
 Rums, Port-wine, Pies, Pudding, Sugar
 Chestnut or Peanuts, Potatoes

Wheat or Bread or Biscuits. Rapeseed
 give Mosell's Wine has less sugar.

Obesity

Cut out Breakfast for such foods
 make fat.

Eat meat for Dinner having fat,
 no bread or butter but some vegetables
 before stated. take little water after
 meal sip one glass slowly.

Watch urine.

Diabetes

Opium dose increased till man may
 take from 3 to 5 gr. a day usually in powder.

Give Saline Purgatives with opium.

Codein $\frac{1}{2}$ gr. 3 or 4 hrs not too affect.

combine Alkaline carbonates for thirst etc

" Bromides for sleep.

Salicylic Acid & Preparations in gouty
 patients with Diabetes

Bromide of Arsenic 4 to 5 drops. 3 x day.

Ergot $\frac{1}{2}$ teaspoonful doses.

Constipation

Treat as treated alone.

Sticking & test urine.

Diabetic Coma put on milk diet & alkaline
 drinks. & Normal Salt Solution injection.
 & Rectal injection. Gangrenous Diabetes
 fatal.

Cod liver Oil makes fat.

Yeast cake divided in 6 pts. 1 pt in milk
 3 times a day

Gout

Inflammation of Joint usually Big toe - Rich People -
" between Phalanx & Metatarsal.

Chronic
Muscular
Rheum.

Colchicum - Wine & Root - 10 to 15 drops 3 times a day
may give with Salicylate of Soda.

Solus Salicyl. 3 IV
Sodii Sodii. 3 II
Vinc & Colchici 3 50
Syr & Sacchar. 3 10
Rheum Dis. 3 100.

Tabl. every 4 hrs.

Colchicum may cause Diarrhea may
give in this Perseus. 1/2 Morphine

Colchicum sal

Ictheric Salve Hot. Application etc.

Diet

Soup. Veg Broth. Fish Soups

Rare Beef. Fresh fish. meats: Fat Bacon

Ch. Game all Spicing. Breadcrumbs

Rice. Egg. Oak meal. Rye. Corn. Bread

Macaroni. Cracked Wheat. Cornmeal

Linseed. Rolls. Sweetbread.

Vegetable. Potato. Mash. Green. For St. Bacon

Small Cabbage. Cucumber. Green. Lettuce

Calory

Dessert: Cream. Malt. Fudgy. Rice. Sage

Wheat. Stewed fruit. Dainties.

Hot tea. Milk. Butter. Toast. Water

Drinks.

Must Not Use.

Veal. Pork. Goose. Duck. Tur. Salt. Light

Wine. Preserved. Meats. Cold. Meats.

Beef. Salmon. Lobster. Prawns. Trout.

Crab. Asparagus. Mushrooms.

Spices. Pies. Cheese. Nuts.

Wine. Fruit. Tob. Coffee. Cider.

Malt. Liqueurs. Champagne. Wines.

Chalk Deposits:

Piperazine 10 to 15 ^{grs.} drop in water.

Salts of Lithia

Pleurodinies

Chronic

Rheum.

Gumblage

Strap of hands.

Use of Massage & Electricity Hot air Bath

Salol

Com acetonaliid fates

Arsenic - Fowler's Sol.

1/2 gr. Pernicious Anemia

Chorea Arsenic is a specific. Child bears best begin + drops Fowler's + increase till comp. arise.

Diseases of Skin. not all.

1 1/2 to 2 will kill. excessive rate as its antidote.

Severe Burning, cramps.

Fe Cl. + Ammonia will give hydrated sesquioxide, Iron is antidote for Arsenic.

Most readily detected.

add HCl to st. contents + add piece of copper. + Metallic substance will form on copper.

Arsenious + Nitrate of Silver

Dec. 19, 05.

Comp. Syr. of Squills

Tartar Emetic 1/4 gr. in Squills for False Croup.

R. Sodii Benzoat.

Syr. Guaiacae Comp

" Mucos.

Aqua Dis.

Teaspoonful. qhs.

Tannic Acid is Antimony Antidote.

Glossitis.

Antiseptic Wash.

Pharyngitis. Remove cause

Tonsillitis Acute

Fallicular T.

Quinzi Pastils. Abscess Swallow ice

Tr. of Aconite internally.

Chlorate of K. + Perchlorate of Iron Internally.

TT.
3
3
3
3

Furunculosis. Staph. C. infection.
normal areas between follicles.

Salicylates & Na.

Benz. & Na. - use as aq. sol.

Run a course of 5 days.

Inflammation of Esophagus.

Sweet Oil, acid drinks when burn
by Caustic Potash may lower

Stricture of Esophagus.

Jan. 4. '06

Indigestion is symptom of many diseases. ^{Remedy}

Hyper & p. acidity, atonic cond. Dilated stomach

Give alkali in acid for hyper or types.

Give sour. for atonic cond.

Retention of food - wash out

Acidity causes Pyrosis, Heart Burn. Give

Subnitrate of Bismuth neutralizes acid

+ coats mucous membrane of stomach

give with Bicarbonates of Na. with Digestive.

+ with Papoid

R Bismuth Sub nitr. ʒ ii

Papoid

Sodii Bicarb. aa. ʒ.

Codurine Sulph. ʒ i

Mft. Pils. ʒ. ss.

Take eating 3 times a day.

R. for Subacidity

Acidi Hydroch. Dil. ʒ i

Co. Ther. Vinica ʒ i

Mft. Sig. 15-20 drops after eating or

Change Diet to relieve Constipation

Have Regular Habits.

Aloin, Strychnine, Belladonna.

Creosote & Sydnor. Carbolic Acid for Belching

& Gurgling in Stomach. fermentation.

Acute Gastritis, over eating, Poison etc.

Empty Stomach by wash or vomit.

Give Morphine & Morphia to grown people.

Jan. 9, '06. Flank steak good Diet well Broiled & exercise -
 give no greasy food - baked potato, toasted Bread
 no Pastries, Lamb chops. Roast Beef. Regulate Bowels
 Gastric Ulcer. Severe form. Stomach trouble
 Blood from stomach is blackish. increase
 & c. Put to bed at rest Nitrate of Silver
 4 gr dose. No Diet except per rectum.
 Milk 250 gms.

Yolk of 2 eggs
 2 gr salt.
 15 cc Clarified Wine
 15 grs Baked Flour

} Enema

Peptonized milk & Boiled Milk.

Jan. 11, '06 Cancer of Stomach. Excessive Vomiting. Pyloric Ex
 fed with food readily absorbed. fluid diet.
 Bismuth Sub Nitrate.

Carbolic Acid or Creosote. Hydrocyanic Acid.
 Laurel Cherry Water. Chloroform in Water.
 Carbonated Wine - Champaign. Washout Stomach.
 Muric acid of Cocaine 4 gr.

Vomiting of Pregnancy. Oxalate of Symplic
 Hot application. Blisters
 Bleeding. (Haematomys) Tin Cl. of Iron.
 absolute rest by Morphine. 10 doses Adrenaline 1-1770
 Peroxide of Hydrogen. Fl. Ex of Guaiacum.
 Condurango Syr. 7.

R
 Acids Muric Del 3 III
 Ex Fl Condurango 3 SS
 Essence Peppin

3 II
 teaspoonful 3 times.

Rectal Suppository with Opium.

R Put Opium 10
 mfr Supper Rectal No 5.
 One every 2 hrs.

Jan. 16.06. Acute Diarrhea get rid of irritating material.
by Laxative. (Bism.)

R.

Bismuth Subnit. $\frac{3}{4}$

Tr. Opui. $\frac{3}{4}$

Tr. Catichu $\frac{3}{4}$

Aqua Listerin $\frac{3}{4}$ ss

Aqua Mistle Pipe $\frac{3}{4}$ ss. $\frac{3}{4}$ II

Teaspoonful.

Boric Acid Enema to wash out
Bowel.

Tanagin, Tanalbin. pass thro stomach

R.

Salol

Bismuth Subnit. $\frac{3}{4}$

Lact. Doveri

Lact. pepsin

Mft. Puts No. 3

one before each meal

Milk diet. (Boiled)

Bottle fed babies. (Summer Complaint)

Milk & Cow best substitution. Sterile
bottles & clean nipples.

Clean out intestinal canal? Calomel +
Castor oil. Withdraw food - give a little
rice water. Children do not take Opium well
Wash out stomach for vomiting.

give lime water with milk to neutralize acids

Aromatic Spt. ammonia 3 drops

Brandy

3 to 5 drops.

give frequently in Water.

Jan. 18.06
Dysentery

Change of Climate is good

Begin with 1 mg. Castor Oil or Salts.

Specific treatment in Amps used with Morphine.

Antitoxin used in Japan

Small & repeated doses of Sulphate of Magnesium

Magnesium Sulphate $\frac{3}{4}$

Tr. Opui

Aqua Mistle Pipe $\frac{3}{4}$

Teaspoonful

Enemas may be given
to 3000 Blotoids & follow with Water better
is 2% Boracic Acid.

5 drops of Iodine injection for gonorrheic Coli.
5 or 10 gr. doses of M. Pymol. Santonin 3 gr.
wash out with antiseptic sol.

Diet same as in Diarrhea.

Diarrhea of Liver Abscess remove Abscess &
Diarrhea will disappear.

Dilute acid.

Jan. 30. '06.

Rectal Diseases - Surgery

Hemorrhoids. Piles, usually in male
wash clean & place in proper place -

Bleeding Piles.

Comes from Chronic Constipation.

Ext. App. Goulard's Sol. With Taper
(Laudanum Sub acc. of Lead)

R Ext. to Piles.

Tannin gr. XX

Urtic Opia gr. XX

Cocaine Muriat. gr. X

Ung. Stramonium

May be put in Suppositories

Application. Hot Puffs or Hot Vats.

Feb. 1. '06.

Relieve Constipation. Epsom Salts.

Diarrhea

Liver

Laundice in Babies frequently - usually

Disappears. Serious when Bleeding occurs.

Biliousness - means constipation. relieve

by Calomel 12 Tincture 1/2 gr. each very br.

Relieved by Purge. prevent Sour Foods.

Of one dose 3 to 5 grs. at night & br. follow

to Sulph. & Magnesia.

Feb. 6. '06.

Sclerosis of Liver - Caused by Syphilis.

& by drinking whiskey

Epsom Salts 1/2 gr. Elixirs in Capsules.

Don't tap early. Clean & Taster.

Alternate Cathartics to Diuretics - Diuretics.

Feb., 8.00. Treat. 2 Gall Stones: Cannot be dis-
solved as yet.

Colic & pain R. Hypoch. Region.

Morphia 40 per cent. for pain.

Following Paroxysms. have chill then
high fever & jaundice usually follows.

Withdraw from fat. Sterch. fats. sugars.

Cold water injections. Sweet oil has
been given. Hot applications. Removal.
Taper down.

Milk diet. Skinning.

Begin with good Cathartics.

Chloroform 1/2 grain per day

make emulsion use Chloroform Pearls

R. Red Granate (Cark) 3 i

Purplum Seed 3 ii

Crush in mortar skin & all.

Mix. Boil. enough water to make 3 ii
add when cool

Ether Ex & Felix Meas 3 i

Oil Tangle 3 i

Mix Sig. at a dose. 15 min after
taking Chloroform.

For the following days outsets.

Respiratory Tract:

Spasmodic Croup, Laryngitis,

child 3 yrs 3

R. Heavy Subcut. flow 3 ii

Mix. Paste No. 5.

1 day 10-min until 1st onset.

give only 2 powders.

Ext & Int. Heat.

Comp. Symp. 1/2 grain 3 times

R. Ether Benzoin.

3 ii

Syr. Symp. 1/2 grain

3 ss

Syr. Symp. 1/2 grain

3 ii

Syr. Symp. 1/2 grain

3 ii

Feb. 13. 06. Asthma Bronchial.

Mustard plaster vinegar & agerates action
 Hot application. Amyl Nitrite. Inhalant
 fumes of Pearl. Bromide + Chloroform
 Morphine. 100 gr. Sytic Glycine.
 Potash Iodide 5 gr. to 20. 3X day.

Pleurisy. Relieve pain by Heat or cold on
 dry Blister. + adhesive rubber strap.

Hypodermic $\frac{1}{4}$ Morphine. May have an Exudate
 into Pleural Cavity. Place tube within
 from between 6 & 7 Rib on right.

Comp Jalap Powder. Cathartic. Diuretics,
 Cream of Potash.

Comp Quina. Fever present.

Mar. 10. 06. Dr. P. Pot. for Pleurisy.

Tuberculosis: Prophylaxis. Curable in
 early Insipient Stage. Send to Colorado.

Atarondas. N. C. Pine forests. S. Cal. Ariz.
 San Ant. Texas. Creosote capsule or Drop
 1 drop 3X to begin. in milk or whey.

Special Symptoms. Cough. Codlins Mix
 Chloroform + Chloral Morphine. Quinine.
 Bleeding. 1/2 grain, Sc. Bg. 1 Hypo. Morph.

to stop Cough. Ergot, Iron, Hydrastine, Gallic.

Night Sweats: Camphoric Acid, Atropine, Sassa.

Fever: Sponge. Diarrhea. Sub Nitrate Bismuth +
 1/2 Opium + Cataplasms.

Pinto Opi

Plumbi Subnitrat 3 i

1/2 Cap. 200 XX

in 2 hrs.

give Boiled Milk. Enema. Tarch Solg Opium
 Edema: Nourish.

Mar. 6. '06. Disease of Heart.

Percarditis similar to Pleurisy.

Follow rule of Rheumatism & pleurisy

Rest. Blister for pain. Digitalis may be used.

Apr. 13. '06. Tr. Digitalis. best.

Digitalis in { stimulant. used in water

... { sol. in alc.

... { sol. in water. white. depressant.

Construct also Motor Digitalis.

In accumulative action Patient becomes

nauseated. Arteriole Tumor. Tr. of Aconite.

Acute Endocarditis. In our experience

Absolute rest. Sod. Sal. Digitalis.

Chronic Endo. Sol. in water. & ...

4 grains ... Lent ...

Tr. Digitalis. Tr. of Aconite.

Myocarditis. Latter part of life.

... associated with Angina pectoris.

Morphine 2 gr. Nitro Glycerine 10 gr.

Nitrite of Amyl. 300 gr.

Digitalis S. P. S. ...

... patients do to go out in winter. & ...

Light meal in evening. Henke's Bath.

Mar. 20. '06. Acute Bright's Disease

Put to bed. keep warm. Absolute rest.

Hot bath. Purgative. Pilocarpine. 4 gr. Nitrium.

Diuretic. R.

Kali. Acetate. 3 1/2

Liq Ammon Aet. 3 i

Spl. Nitri Dule. 3 1/2

Syr. Lemonis. 3 1/2

Aqua Dis. 3 1/2

... every 3 or 4 hrs.

Poultice over ... Flax & Mustard.

Diuretic. 10 gr. ... Little water, no meat, ...

4 parts milk. Mountain Valley Water is good Diuretic.

Chronic Nephritis. casts in Sediment urine
indicative p. a. y. C. m. d. : ... take
T. k. an an. nitrog. now good. H. k. good
Diet. Spinach. R. f. u. c. a. t. e. d. T. r. j. & ...
of Am. Acetate.
R. Natural Besham.

Table spoon in water 3 times a
day 1 hr. after meal
Asthma ^{sulph.} 3 gr. may be given with above.
For Heart Complications.

18 Limestone. Kali Carb. 3 TT
 nb. 1 lb. Am. Carb. 3 TT
 Sept 11th Lule. 3 TT
 1 lb. Ammonia 3 TT
 1 lb. L. galates 3 IV
 1 lb. L. carb. 3 V

Kidney stone, greenish. plain. $\frac{1}{4}$ gr. Morphine
Hot application. Lavation.

Sp. us. L. us. es.

Cerebral Apoplexy. bursting Rii vessel
in Brain. forms clot, pressure, paralysis.
Croton Oil Calomel. Rii. Ka.
Keep head up, feet warm, head cold.
May clear up in a few weeks, after ^{8w} if you
bad. May happen a second time
Ka. Do. internally. Three times, seven.
Results in Hemiplegia.

Electro-Therapeutics. Born.

Feb. 9. '06. Inherent power to return to health.

Therapeutic Diagnosis

1. Etiologic Ther. Diag.
2. Pathologic " " "
3. Symptomatic " " "

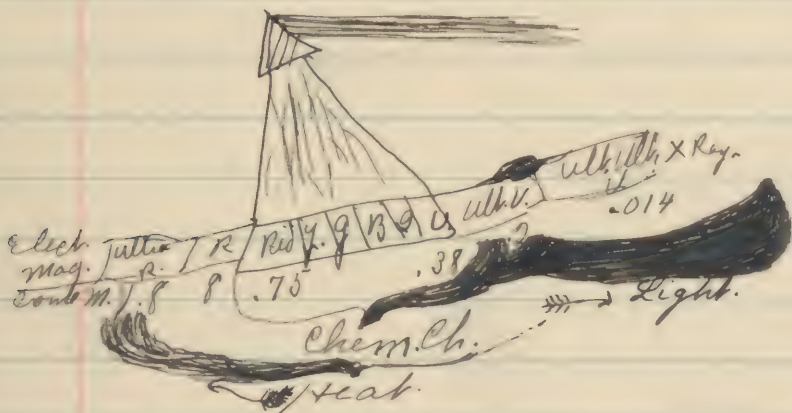
(a). " may have to be considered first as hemorrhage.

(b). Pain or functional distress.

When to intervene. why. when. where. how.

First consider specifics.

Oct. 16. '06. Electricity peculiar state of matter. amplitude &



Oct. 23. '06. 1. Electro Physics
2. " Physiology.
3. " Therapeutics.

1. Pressure. called Voltage, E.M.F. Potential.

unit of E.M.F. is Volt.

Coulomb certain amt of Electricity.

Ampere rate of flow of certain amt per sec = unit / Rate of flow.

A current loses pressure by passing thru conductor.

Variations in Resistance { quantity of Cond. material.
That of cross section " " "
Length of Conductor.

106 cm. } unit of electrical Resistance called Ohm.
41.73.° }
1 sq m. }

Nov. 13. '06.

freezing pt. water.

Ampereage.

$$V = \frac{E}{R}$$


Current flow = $\frac{EMF}{Ohms}$.


Character of Current flow.

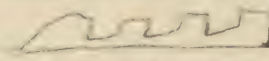
for body we want low ampereage & high voltage.

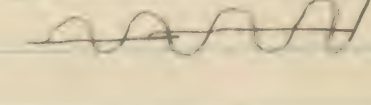
1. Connecting in Series increases Pressure not volume.
2. " " Parallel " 1 Volt + 2 amperes.

good in use for body.

Direct current - galvanic current. 

Interrupted direct current. 

Direct Pulsating current 

Alternating always interrupted 

Nov. 22.06.

Ohm's Law

$$C = \frac{E}{R}$$



→ increases Current strength

Rheostat an instrument to increase resistance.

Carbon. German wire. & Liquid Rheostats.

Resistance increased throws current further thro' Body.

Current Density. current strength per unit

The unit of Current strength per unit of cross section area of conductor Density varies directly with the current strength. Density varies inversely with area of Transverse section. $D = \text{Density}$. $C = \text{Current Strength}$.

$A = \text{Cross Section Area}$. $D = \frac{C}{A}$.  24 m.a.

$$D = \frac{24}{24} = 1$$

Normal skin will stand 2 ma.

Electrodes - are Terminals / Poles / Battery -

1. Protected Electrode. 2. Bare Metal. used mostly as cathodes.

Felt avoids electrolytic action. Coverings are substances which will absorb fluid water + Bicarbonate harm. Sol work better. Na. Cl. & Bicarb. Sodium.

Nov. 27.06. Medical prop. of all currents alter in proportion to the their relation to their voltage & amperage.

Amperage is predominating in galvanic current.

Galvanic used in 2 forms only. Continuous & interrupted.

Continuous possesses Polar properties which are at Poles.

Interpolar goes on within body between poles.

Physiological action of Polar action ^{continuous current} are 4 in number:

1. Cathodic is when chemicals are carried into body when placed between electrode & body.
2. Electrolytic is chemical changes which take place at poles.

3. Catalytic: Interpolar effect: changes within body.

4. Electrotonic: effect producing changes in nerve & muscle.
Tendency is to carry fluids from + Poles. used in congestions.
+ Pole is anti congestive & denervative.

- Pole is just opposite. Bare Metal applied to semi solid compound we get full phenomenon. Electrolysis at + Pole of Cl, C, S, & P are set free. & attracted to the + Pole we have the acids H_2SO_4 , HNO_3 .

Tissues become hard & acid makes it stick.

At - Pole H is given off & Oxygens are attracted which are de H. Ca. H_2 tissues become soft & congested.

Increase amperage with Bare metal & Caustic action may be broken. Slight amperage is a styptic.

3. Catalytic action is on Lymph. Blood?

+ Pole is soothing & sedative - Pole is irritating & stimulating

Dec. 12.6 Positive Polar Action with Protected electrodes.

Sedative nerve irritability. tonic to nerve & muscle fiber.

Anticongestive. Promote pushes fluids to negative pole.

Stronger current produces counter irritation, local pain, beneath electrode. & will finally necrose.

Negative Polar action with protected electrode:

increases nerve irritability, relaxes fibrous tissue, attracts fluids from positive pole. Congestion.

General interpolar action Nutritional, electrotonic, sedative.

Faradism, attractive, warming, refreshing, vitalizing.

Positive local polar action with nonabrasable, bare metal electrode (Platinum). within soft tissue.

with mild current. sedative, tonic, nutritional, anticongestive, hemostatic, Muscle Contracture, mildly caustic. Cataphoric & electrolytic.

with moderate current: styptic, coagulating, drying, shrinking of tissues. muscle contraction, caustic.

antibacterial, antiseptic, anesthetic. Cataphoric, electrolytic

with Strong current: Blanching, drying, denervative, coagulating, hardening. Muscle contracting, antiseptic, germicidal

Cataphoric, Caustic, rapidly increasing to carbonization with gross destruction of tissue. scar contracts.

(Page 67.)

Nov. 23 '05 Aloe given in form of Pill is a cathartic
acts on lower bowels.

Don't give to Pregnant or in Piles.

given 1/2 to 10 gr with Strychnine

R Adonis vernalis.

Quinine Sulf.

Mercur Sulph-uric - 10 gr. xxx

Aloe (Loe) 9. xxx

Oil Sassafras 5th x

with Capsule No xxx

3 three times a day.

Given in Comp. Cascara tablets.

Aloin, Strychnine, Belladonna, Cascara.

Aromatic Spts. of Ammonia - stimulant.

Oil pericarpate by Water

Am. Muriate expectorant.

" Water for fainting, irritant.

Alum. used as emetic & wash, used injection

$H_2(SO_4)_3$ for Paralysis of Bowel.

K_2SO_4

Apiole. - parsley - oily fluid *Thymus vulgaris*
Don't use in pregnancy.

3 to 5 drops.

Oxide of Arsenic. Arsenious Oxide As_2O_3
Does Verminalives for Baby Colic & acidity

for Nervous Ladies, for Trunkitis,

Belladonna Oint for Pain, sore nipples & breasts.
dries up secretion. Milk etc.

Sulph. Iatropia - dilates pupil. antidote to Spasm Pains
Hypersecretion of Lung Bronchorea. Colic & Cramp
4-10 gr. Hypo. maximum Dose. Aloin, Stry, & Bell.
(Cathartic Pill.)

Bismuth Sub Nitrate. - Disorder of Stomach. 5 to 40 grs
B. " " Gallate.

Elixir of Bromide 1/2 to table spoonful in
water to grown person.

Good in Nervous a sedative Br. Strontium

less irritating. Nervous system & const. ton
Brain. & sessions at night

Bromide of Camphor for Passionate etc.

Whooping Cough.

Bushu acts on Mucous Membr. of Bladder

Fl. Ex Dose 30 m. & gr.

Canabis Indica powder drug - New M. & H.

Fl. Ex. 10 to 20 m. Put to bed.

Hemp root

Sedative Relieves pain

Cough mixture for Tickling sensation.

Does not constipate.

Depressed patients. Melancholia people.

18

Canabis Indica (Powd Drug) gr. XV

Papier

Soda Bicarb.

aa 3 ss.

Mft. Put to bed

One before Meals -

Salicylic A. in Alcohol. with Canabis
Indica relieves.

Cantharidis. (Spanish Fly).

Used in old control water

in form of cerate most irritating.

in Pleurisy Blister used only -

Cantharidin - Collodion - for Blister.

Treb. 100.

Capeicum Tr. & Put. mostly used.

used to increase absorptive pow. of Stomach.

Prescribed with fennel.

R. Quinine Sulph. 3 ss.

Put to bed.

Mft. Cap. 10 ss.

2 every 4 hrs.

R. Valerian Tremulous.

Tr. Valerian 3 ss.

Capeicum 3 ss.

Sub Mft. Bismuth 3 ss.

Elx. State Peptis 3 ss.

2 every 4 hrs.

Carbolic Acid - distil. Cold tan.
decolorized.

Disinfectant. somewhat Poisonous.
Used Internally 3 percent solution.
2-3 drop doses. also for Tetanus &
sympyema for tetanus.

Linseed oil, Turpentine water, & a little
Carbolic for acute Burns.

Is poisonous when given for any length
of time. Poison recognized by odor.
Dry mark on Mucous Membr. raised & white.
Weak pulse, sweet, Paralytic affect on Res. M.
Alcohol diluted antidote 15 gr - give
then Sulph. of Soda. or Mag.
Itching in Jaundice apply 2% Alkaline
solution. also itching in Piles.
for gonorrhea.

R. Acid Carb. Mx
Kali Chlorat. ʒi
Aqua Ferrous.
... Anise ac ʒi
... this

Cascara. Powdered, fl. Ex. Solid Ex.
Pill. Lactate.

Castor Oil. applied to cracked nipples.
Lead Shields for cracked nipples.
for beginning Diarrhea.

given with Lemon juice. Orange juice.
Beer & best is with Whisky.

Chloral Hydrate 15 gr. 5 gr. Antispasmodic.

Strychnine Antidote

May be used Ext. with Camphor for neuralgia.
(Pleuritis. Lanoline 30 to 40 gr. to ʒi).

Chloroform. for all sorts of
for Tetanus & sympyema.

Chlorate of Potash. mouth wash. 1 gm to 2 oz. water.
for stomatitis. for sore throats.

~~Cocaine~~ 1884.

Cocaine Hydrochlorate. dilates pupil (Mydriatic)
on Mucous Membrane.

Antidote for Opium. Poison treated symptom-
atic. Anomia Digitalis etc.

for Relief of Pleg. Vomiting 8 to 12 gr 3X
may be used for cough.

Codine.

R Codine Sulph. gr. ii

Putoacetanalic Comp. gr. ii

Mf. Puto No. XII.

one every 2 or 3 hrs. till relief.

Cod Liver Oil given with Whiskey. contains
some Iod. given for insipient T. B.

Copaiba - Oleo Resin. Balsam. 10 to 20 drop. doses.
Gonorrhea. Prostatitis.

R

Zinc Sulph.

Chloride of Zinc aa. gr. xxx .

Tr. Zinc gr. ii .

of Dish. gr. vi .

form of injection for Gonorrhea after
about 2 wks.

Ergot. Fl Ex 30 M. S. J. Uterine hemorrhage.
was used to paint Erythema before the was used.
Contracts Uterus. Should not be used during
labour. may be used after $\frac{1}{2}$ teaspoonful. Give
for Hemorrhage in Fibroid tumors, Uterus.

Ergotin 3i

Hystroistine Hydr. gr. v

Mf. Cap. No XX

every 3 or 4 hrs.

May be used for other Hemorrhages more
especially Uterine Hemorrhages.

Euterium Hydrogenae Cathartic for
 robust people with Acute (w dehydrating)
 M. Euterium gr. iii Jalap used when prod.
 M. H. Pill No. XII.
 1. even + hrs. till acts.

Euroline / r. So. used instead of iodine.
 good in soft. Chancre.

Formaldehyde. gas sol. in Water.

Antiseptic. also as disinfectant. Sulphur
 good disinfectant. Chloride of Lime + Sulphuric
 Acid good. Eutroperin formed by heating
 formaldehyde with ~~ammonia~~.

R. Eutroperin 7½ gr. } for cystitis.
 in pills or capsule.

M. H. Cat. No. XX. every 3 hrs.

Cystogen a form of Eutroperin.

Dissolves Uric acid

Hydrocyanic Acid (Prussic Acid) 20 drops, store.
 Ammonia Antidote.

used for tickling cough. 1 m. chest.

R. Acidi Hydrocyanici. M. XII

Syr. Toluol

Teaspoon. every 2 hrs

R. Stomach trouble.

Bismuth Carb. M. XII

Acidi Hydrocyanici. M. XII

Aqua Rosae. M. XII

Aqua cinis. M. XII

Teaspoon. every 2 hrs.

Hydrogen Peroxide. Use in surgery. good in
 nose bleed. Don't use in ear.

R. or spray in Epistaxis.

H. H. H. H. H.

H. H. H. H. H.

Aqua H. H. H.

M. H. Sol. use as a spray.

1 to 4 gr. internally for fermentation in Stomach.

April 17/06

Icthol distillation. 1 lb. 1/2 oil. 11/2 alcohol.

Chronic Bronchitis. R. 5 gr. 3 x a day.

Erysipalis. painting. Inf. am. new. 11/2.

equal Vaseline & Icthol.

Iodide of Potassium. 1. Syphilis

Antedote for Metallic poisoning. Bronchial Cough.

Chronic Rheumatism. R. 5 gr. 3 x a day.

3 to 400 gr. 10 gr. 3 x a day. for Syphilis.

R. Hydrarg. B. C. 5 gr. 7

Kali Iodidi. 3 ii

Syr. Sassa.

Aqua Dist. 3 viii.

Tablespoonful. 3 x daily.

R. Chronic Rheumatism.

Sodii Salicyl. 3 ii

Kali Iodidi. 3 i

Uini Colchic (Red). 3 ss

Syr. Sassa. 3 i

Aqua Dist. 3 viii.

Tablespoonful every 4 hrs.

Asthma 5 gr. Do. R. stimulates Expectoration.

R. Asthma.

Heroin Muriat. 5 gr. 7

Kali Iodid. 3 i

Syr. Prunus Virg. 3 i

Senega 3 ii

Aqua Dist. 3 vii.

Tablespoonful every 2 hrs.

April 17/06.

Iodine in alcohol.

Iodoform - treat so with R. & Caustic Potash

+ alcohol. obtained from seaweed. ash.

Fin. So. is counterirritant.

Do Ointment

Iodoform. Stimulates granulation. good

in Burns.

Do. Ointment 1 gm. to ounce Vaseline

April 21. Iron & its salts. Lewis & J.

introduced by Lewis. Platen up in ...

Quercus ... (...)

Carb ... iron ...

F. O. 1 ... $F_2SO_4 + H_2O$

Bands ... $F_2SO_4 + 1/2 O_2$ } 163 ...

Use a lat. with ...

Quercus ...

iron ...

20 to 30 drop ...

R ...

Kali ...

... ..

... ..

... ..

... ..

... ..

Lig. ...

... ..

Table ...

... ..

Hydrated ...

... ..

green ...

... ..

Iron Alum

... ..

... ..

... ..

... ..

May 16 Mercury from Cal. Blue Mass for purge.
 Blue Liniment. Mercury & chalk
 used as Antiphlogistic. Syphilis. Syphilis.
 with so / Potassium
 Potassium of Mercury
 Gray Oil Bechlon
 Chloral Salicylate of Mercury } 4 Hops.

(Hydrogen Potassium 9 gr. 25 gr.
 100 gr. 100 gr.
 Pot. 100 gr. 100 gr.
 100 gr. 100 gr. after 100 gr.)

Dec. 18. 06. Negative Polar action, bare metal, with any metal
 Born.

In soft tissue. With mild currents, increases
 capillary circulation, ~~nerve~~ muscle excitability.
 mildly electrolytic, Alterative, relaxing, dilating
 nutritional, healing to ulceration.

With medium currents: more actively congestive,
 softening, nutritive, electrolytic.

Strong current: hemorrhagic, exchorative
 soft pink scar. Very light current: caustic effect.

Positive polar action, with bare metal attacking
 electrode. Zinc, copper, silver, nickel.

Medium current decomposes & deposits, exchorates.

the metals within the tissues surrounding + Pole.

Antiseptic, germicidal, anti-hemorrhagic, drying.

styptic, astringent, tonic Nutritional. Alterative

Cure of Catarrhal inflammation of mucous membranes.

Dec. 20. 06 Reaction / Degeneration:

Electric Irritation causes altered irritability of
 muscle + contraction.

gradual moderate application to nerve there is no
 contraction. Stronger causes contraction tetanic.

Sudden. Makes Break causes contraction.

+ Pole is anode.

- cathode.

an electrotonus under anode.

Cath Cath.

(Electrotonus is
 change in irritability
 of M. & N.)

1. Testing at anode irritability is diminished.
 2. Likewise testing Cathode after irritation the irritability is increased.

- { anelectrotonus diminishes irritability.
- { Cath .. increases ..
- { Disappearing anelectrotonus increases ..
- { " Cath .. decreases ..
- { Opening anode causes contraction.
- { Close Cathode (this is greater)
- { Anodic closure .. no ..
- { Cathodic opening .. " ..

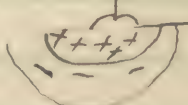
Tissue immediately under pole is Polar Region
 .. around .. " " " " " " " " " " " "

C.C. - 2 mA.

Normal
 formula.

Jan. 3, 07.

Muscle contraction is manifest by rapid interruption or sudden change of Density.

Polar zone charged with same as Pole 
 Peripolar unlike as ..

nerve being away will depend on its position.

In testing Muscle with Galvanic don't have both electrodes on muscle.

- 1 M.A. gives no contraction.
- 2 .. R.C. get ..
- 3 M.A. An.C. " ..
- 3.5 .. A.O. " ..
- 15 .. C.O. " ..

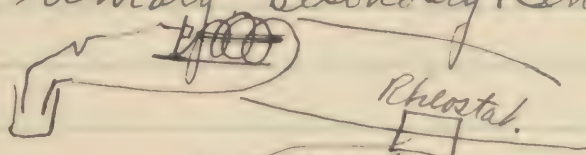
Testing Muscle action is on Peripheral Neuron
 a. Reaction of Deg. the Muscle no longer gives any action of Faradic or Static.

b. 1. Contractions of Muscle are not so marked.
 2. .. become equal of Dif. Poles.

3. Complete Reversal of Polarity. R.D. of Cb.
 (ae. C.C. C.O. 20. R.D. of Cb.)

Stimulus of less than $\frac{1}{10}$ Sec. will not contract Deg. M.

Jan. 10. '07. Faradic Battery: current is an induced current.
 At make flows one way continued comes back to
 normal. at break flows opposite way.
 Change in position brings about a change also
 Primary Secondary Interrupted.



Controls amt. current.
 galvanic ^{Large} amperage. Low voltage.
 Faradic Smaller. larger.

" has no electrolytic action.

Actions are on Striped & unstriped muscles.
 60 to 125 Per M. will contract muscle & rest it
 sufficiently. No effect on unstriped muscle.
 20 to 30.000 Per. M. does not affect striped but the
 unstriped muscles & viscera etc.

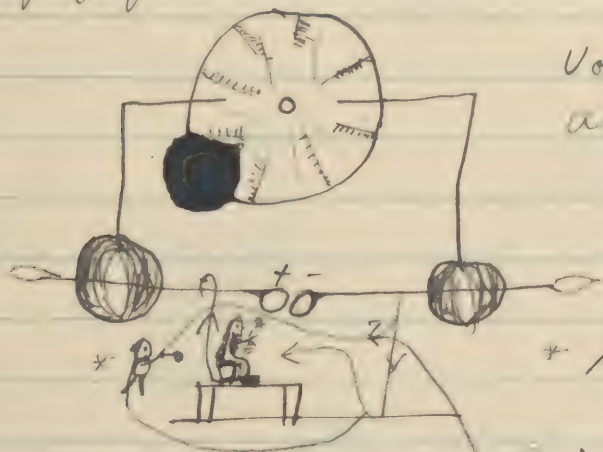
fine coil for fast current.

Contractions with coarse coil & slow currents
 contract muscle & are regenerating.

fine interruptions fine coil produces contractions
 to non stop applied in direction of artery in a
 increases ^{4 pole} metab. old ~~serous~~ serous fluid.
 relieves congestion

High frequent current on mucous surfaces.

Jan. 17. '07.



Voltage high.
 amperage low.

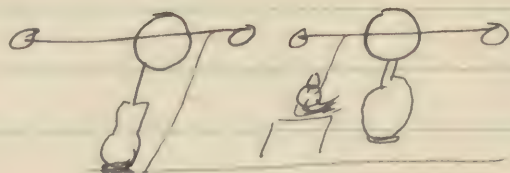
ground less irritating.

* First is breeze
 spray
 sparks.

more irritating.

Neg. insulation where P is changed negatively.
 Pos. ..

Jan. 31/87 Morton Uave is a constant charge & discharge of Patient



Morton's induced current. by Leyden's jar.

Physiologic action:

No electrolytic or Cataphoric action.

A regulator of function.

Regulates Temp. Pulse. Resp. Sleep. Perspiration
Excretion. Secretion Increases Metabolism
by stimulating to absorb more O. this is good
in gout. Rhen. Anaemia. Diabetes.

Spark produces strong Musc. contraction
gets rid of swelling about joints. Oedema etc.

+ Spray is sedative. - Pk irritant on ulcers etc.

Feb. 7. 07. Diabetes Mellitis. Sugar from Starch also some
Proteids are converted. Restrict starch & sugar. Exercise.
Codein. As. & Antipyrin. Electro-therapy.

Static treatment is best. Regulates function.

Counterirritating⁺ spray along Vertebrae.

Morton Uave. + Frictional spark with roller over
abd. & legs. Local + Counter Irr. Spray to base
of Brain for headache.

Gout: Sodium Bicarbonate deposit. in Conn. tissue

Feb. 28. 07. Endometritis Catarrhal. septic. for. senile.
 Menstr. Dysmenorrhea.

Subinvolution. & Haemorrhages.

Metrorhagia between Menses.


Mens. P. Haem. during Menses.

Mar. 7. 07. Tibromata. Electrode in uterus B.M. 0-50-150 every
 3 or 4 days 5 min at a time. galvanic current.

+ Pole stops Haemorrhage.


Catarrhal Salpingitis. usually chronic:

Exposure to cold. Excessive Menses. intercourse. constip.
 symptoms / acute Peritonitis Local.

Relieve Pain. use Bi Polar Vaginal Electrode. 

disappears hypemia. oil with glycerine. start at 0
 & increase. Use Ball electrode & cotton cover.

April. 4. 07. X-ray tube: Geissler's tube out of which some air
 has been pumped. gas in tube becomes illuminated.

 Plat. mirror. small Particle
 remain attached cause less heat. also focus
 rays. Copper back Pl. to absorb heat.

Some gas must be present & regulators are used
 to sustain presence of it.

Osmoleg. = Pt. heated & H gas passes in.

Automatic Reg. = add. tube also where Chem are
 put to generate gas.

Compound ethers or Esters.

Prepared by union of acid + alcohol.

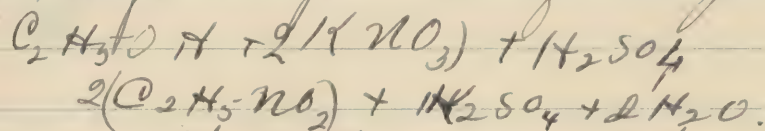
Saponification.

Fat is an ester of fatty acid & glycerine.



Ethyl Nitrite:

Methyl Salicylate: oil of wintergreen.



Sweet Spts Nitro is a mixture of ethyl nitrite in alcohol. 4%.

Amyl Nitrite. $\text{C}_5\text{H}_{11}\text{OH}$.

Aldehydes:

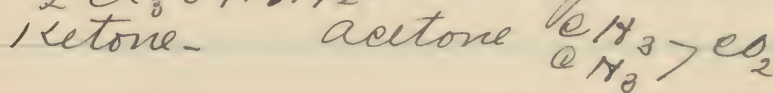
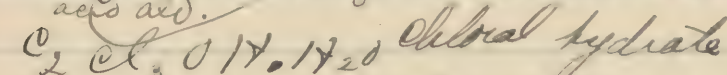
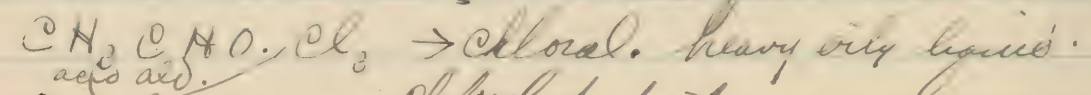
Acid ald. $\text{C}_2\text{H}_5\text{OH} + \text{O}$ which has passed over heated Plat. Spual. $\text{C}_2\text{H}_5(\text{CHO})$.

Formaldehyde. Dist Ca formate \rightarrow oxide &

Pass air into methyl alcohol. formalin 40% sol.

Paraldehyde. is $\text{C}_6\text{H}_{12}\text{O}_3$.

Trichloroacetic acid \rightarrow acetaldehyde.



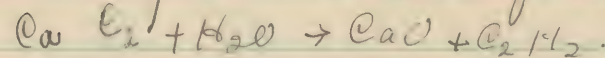
Mar. 13. 07.

HydroCarbons.

Paraffins C_2H_6 saturated Comp.

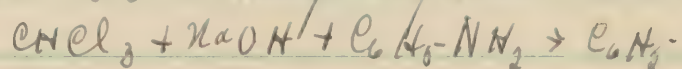
Elefans. C_2H_4 un. . . .

Acetylene C_2H_2 Inflam. gas. prepared by



Test for chloroform:

1. Odor Phenylisocyanide



2. Reduces Cu Sol.

3. B. Naphthol + KOH + heat \rightarrow Prussian Blue.

Iodoform: CH_3CO_2 Ethyl alc + Iodine + KOH.

Ethyl Chloride Pass HCl into Alcohol.

Mar. 26. 57.

Benzine a mixture of Hydrocarbons from distil of Crude Petrol.

Benzene C_6H_6 colorless liquidToluol. $C_6H_5CH_3$ = Methyl Benzene.Xylol $C_6H_5C_2H_5$ = Ethyl. "

all closed benes hard to oxidize.

Phenol C_6H_5OH Prep Cold tar { light oil .. \rightarrow 150-200° large quan. Phenol.
middle ..
heavy .. $Phenol + KOH \rightarrow K Phenate + HCl \rightarrow C_6H_5OH + KCl.$

Cresol

Resorcin-Hydroxy Benzene. $C_6H_4(OH)_2$

Pyrocatechen

 $C_6H_4(OH)_2$ Guaiacol methyl Pyrocatechen $C_6H_4(OH)_2$ $C_6H_4(OH)_2$

Cresote - mixture of Cresols Ortho meta Para.

Lyeol. 50% cresol + oil + KOH. saponify.

Anilin $C_6H_5NH_2$ or amino Benzene.Benzoic Acid (crystals). C_6H_5COOH renders urine acid.Prep: toluene $C_6H_5CH_3$ + heat $\rightarrow C_6H_5COOH$.

Salicylic Acid.

1. Oil Winter green.

2. Synthetically.

3. Dist. Dist. Wood.

 $C_6H_4OHCOOH$. Heat C_6H_5ONa in CO_2 .

Salol.

Acetic acid:

1. Dist. Alcohol.

2. Vinegar Fermentation

3. Dist. Dist.

Dec. 5, '05. Test Meal.

1. Enald Breakfast, 2. Boas B. 3. Kiegl Dinner.
 Gives 5-6 Lactic Acid Elmer B.

Give 2 meals.

Getting Stomach - Hold breath & form
 Pressure on Stomach, Irritate Pharynx, Use
 Aspirator & Bulb.

Stomach Tube

a kind B technique. 4. Obtaining Meal. 5. E. pressure
 Sorry tube, Suction, Boas Bulb, Water Suction

After getting Contents, Inflate Stomach.

Wash for Diagnostic, Therapeutic & to stain
 Remainder of Contents.

Next begin Examination. 1. Macroscopic.

Stomach Anal.

I. Macroscopic

a. Quantity. Normal Break. 30 to 50 cc.

" M. 40 to 80 "

Abnormal

Increase Motor Ineff. Hyposecretion

Decrease. Hyper Motility.

B. Color. 1. Bile, with Bile may have Alkaline secretions
 which modify Acid test.

2. Blood coagulated Dark Brown Color.

Coffee ground vomit. Cancer

Bright Red may be Bleed.

May rupture Vessel of Esophagus.

From Serosa of Liver we have varicose
 veins along Esophagus -

Erosion of Stomach, Streaks from Vomiting.

C. Odor. Normal has little odor.

Rancid odor for Butyric Acid

Vinigar " Acetic "

Foetal "

Poisonous "

D. General appearance Solids, Liquids, Idents.
 Solids give Mobility

E. Division + Dis. Cornmeal is like Corn meal.

F. Mucous signifies Catarrhal Gastritis

Stringy appearance signifies Mucous amount

G. Chemically.

Acidity Test acid or Alkaline Litmus
Diverticulum of Stomach

Kind of Acid.

Free HCl. D. A. Apobenz Congo. Red.

Jan. 2, 06. 1. Urine.

1. Quantity. 1000 to 1500 cc. 24 hrs.

take evening urine for examination.

Path. Spec. keep 24 hr. in separate bottles.

when Doubtful.

calcareous form.

Thymol, Boric acid, Salicylic Acid, Preservatives.

2. Specific Gravity. 1010 - 1020 - 5.

Indicate amt. of total solids. multiply last 2 figure by 2.33 (Passano Coef). no. of gms. in 1000 cc.

3. Acidity or alkalinity.

Acidity due to acid Phosphates $\frac{1}{2}$ H_2PO_4

Alkalinity ... Carbonates $\frac{1}{2}$ $NaHCO_3$

Carbonates formed from Vegetable food.

* Transformation of Citrate etc into Carbonates.

Salicylic & Benzoic acid.

* ~~acid~~ in "urine" & ~~acid~~ ~~urine~~ = ~~hypuric~~.

* Urea.

Normal 72 gm. solids. 30 gm. urea (2%).

formed in liver mostly.

* No. 4, 10 uric acid + Urea. Qualitative tests for Urea, Sulphides, Phosphides etc.

Read to Sediment. Chemistry of Urine.

Albumin.

Albumin of Acidulato with acetic a. + $\frac{1}{2}$ Cl. + Heat.

Test. 2. Heller's. Nitric Acid Contact Method.

Acid Urates may make turbid.

when water comes down & they will dissolve.

Notice for Indian Bile etc.

red. green.

Mucin ring higher up & Mucin Proteids.

* Albuminoses. Disappear on heat & reappear.

2. Potassium Ferrocyanide & Acetic acid.

Strongly Reducible.

Sugar. Dextrose { uric acid test to see if there is any reducing body in solution.

Lactose

uric acid if too much will reduce.

Don't boil too long may reduce uric acid & Creatine may reduce with long boiling.

Bismuth Subnitrate. does not reduce uric & Destin.
Albumin contains sulphur which may cause a
black spot.

Fermentation. Urine + Yeast decant upper portion put in fermentation tube. Make a control? Yeast.

* Acetone, Decotic, Bebe In Butane, Red car. Red
bus, minus. Sediments. = outside.

Jan. 6, '16. * Juan. tests for sugar & alk. Phenylhydrazine.
3. Blood } Blood Corpuscles
Haemoglobin.

Haematin Test. Evaporate Salt. add wine
add acetic glacial. Trichman's Crystals.
Quinacrine. Fr. Quin + Glycerol test.
Add Blue (Suspected fluid) layer it on & at
junction we get a blue color.

Heller's Test: Mn^{++} + Fe^{++} . precip. Phosphat
which are white & Blood colors.

4. Indican (Ka Indol Phosphate,). Proteids
Urine + ~~Alkaline~~, + FeCl_3 + FeCl_2 = Blue Color.
Bermyer 10 cc urine, 100 cc. 10% alcohol solution
(FeCl_3 2 grams, FeCl_2 100 cc.) Indican.

5. Pus. - Cloudy. settles to bottom, don't disappear on heating, viscous like stringy.
Heller's Nitric Acid Test. Precipitate.
Add KOH to supercentrifuged fluid + there forms a gelatinous mass by breaking up pus cells.

6. Bile. from liver - absorbed from liver
 gamelin - forming Acid Nitric.
 Rays - Havers & Sulphur.
 Duplet's - $\frac{CaCl_2 + NaOH}{\text{filter}} + HNO_3$ greenish color.

7. Acetone $\begin{array}{c} \text{CH}_3 \\ | \\ \text{C} = \text{O} \\ | \\ \text{CH}_3 \end{array}$ Dimethyl ketone.
Distill. & test Distillate

Urine + NaOH + Lugol till slightly
warm slightly - odor Sodafum cool
get so. crystals - alcohol gives same.

Use am. 1 H. instead Na + Tr. P. Do.

Directin ~~Antacid~~ ~~Prusside~~ ~~+ alkali~~ ~~NaOH~~
acid. Fully drop by drop to P.P. Phosphates. Red color.
* Gerhardt's. filter + add few drops. Red color.

Beta Ox. Butyric acid. more P. Oxy in urine
more am.

Sedimentation.



Macroscopic.

Micro "

Microscop.

Bact. { TB.
Dys.
Blood.
Epith.
Spermatozoa.
Parasites.

Foreign Bodies

fungi:
Casts: are moulds
of Tubules of the
Kidney.

Pus looks like Leucocytes

Casts { 1. Hyaline Casts { 1. Pure hyaline.
2. Granular Casts { 2. Rony
3. Tubular
3. Epithelial
4. fatty
5. Blood
6. Pus
7. Bacteria
8. Crystalline.
9. Fibrin.

Vol. Ac. 25cc in Beaker +

10 gm. Na Oxalate
(Take out drop on filter paper)
No 2 cc of NaOH x. 1000
NaOH + urine test for pus.

1. Amount.

2. Color.

3. Odor.

4. Consistence.

5. Transparency { Bacteria
Phosphates - Mucos.
Pus

6. Reaction.

7. Sp. G. Total Solids.

8. Total Acidity

9. Alk.

10. Sugar

11. Pus.

12. Urea.

Acetone.

Indican.

(125 mg)
Na Hypo Bromide.

Diabetes

Jan. 11.06. Sugar - Naines
 Albumin - Hellers.
 Acetone - Am OH + Fr of Is. or Distil.
 Diacetic A. -
 B. Dry Butyric

Jan. 13.00 Sediments. Chloroform water 1-200 Preservative
 add $\frac{1}{3}$ volume of Water to Urine.

Crystals Organic or Anatomical Sediment.

Epithelial Cells. { Plain or squamous. tubules of Kidney.
 { Bound cells. Pelvis of " Deep layers. B.G.
 { Elongated " "

Pus { acid Urine - clearly seen with granules.
 { + Acetic Acid on slide of cover slip. see Nucleus.
 { alkaline Urine - breaks up quickly. No. 1 H.

Casts { Hyaline { Pure.
 { Curvy
 { Fibrous
 { granular { fine.
 { Coarse.
 { Pigmented.

1. For Hyaline shut off light are semitransparent, Translucent Amorphous, cylindrical. Wavy edge. if not straight. from size of 7 to 3 times size of R.B.C. drop of Acetic Acid will dissolve Hyaline cast.
2. Wavy Hyaline more translucent. some larger. occur more often in Pyramids where tubules are larger. indented edge. yellow with Iodine red with Hel.
3. Fibrous Casts.
4. Epithelial Cast. may change & become coarse granular or further fine. may have fatty change & may be Pigmented.
5. granular round edge. surface covered with granules
6. Blood cast - Bld cells on outside may be hyaline form. found mostly in Acute congestion.
7. Crystalline amorphous Urates or Phosphates on Waxy or Hyaline. Cylindroid Cast more transparent than false bodies. Watch for foreign bodies.
- 8 False Cast
 Crystals
 urine + alkaline

Accentuated Second Ht. Sound. Enlarged Heart.
 Arterio Sclerosis, High Bld. Pressure.
 Sugar indicates Diabetes tho does not mean it.
 Diabetes

1. alimentary Glycosuria.
2. Brain Lesion. (not Ptg).
2. Medicinal - Chloroform.
3. Pregnancy. Lactose.

Pathological. 1. Lesion in Pancreas.
 2. " " Brain.
 3. Diabetes

Diabetes Path Cond of Kd. & have Sugar in Urine.
 Ability to oxidize use of Sugar in Body is destroyed.

1. Source of Sugar - Carbohydrates.
2. Proteids in food & of Body.

I. Mild - Sug. comes from Carbohydrates.
 II. Middle Severe. comes from " & Proteids of Food.
 III. Severe " " " " & " " Body.

1. Acetone
2. Diacetic Acid. { may be found in certain Cachectic
3. Beta Oxy Butyric { conditions. Acidosis

Acidosis. Determine Amt. of Ammonia.

Ammonia 1 gm. Normal.

Jan 25, 1910. Quantitative Calc. of Alb.

Eschbach. tube.

Reagent = Citric & Picric Acid
 not acids cooked with with water.
 graduated & grams are determined from scale.

Sugar, Benedict's.

Haines & Fiedlings.

Guam. test.

Reagent 1.814 gms. pure CuSO_4
 dissolve in 100 cc. Dist. Water. Add 10.00 cc. H_2SO_4
 + 500 cc. of Liquor Potassii (5%).

Add water to 1000 cc.

Take flask + 100 cc. Haines. + 30 cc. Gum. + urine in
 Put under in Titrate. Boil solution
 & add urine drop by drop till Blue color drops.

Deute sometimes if solution is strong.

Am. added to have atmosphere with no oxygen. + to keep Oxygous O₂ in solution. get rid of Albumin first acidify & filter.

10 cc of Hames is reduced by 1/2 of Dextrose
It took 18 cc of Sug. Sol. to discharge
10 cc. Hames.

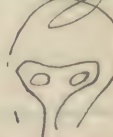
18 cc Sugar Sol corresponds to 1/2 of Dext.
in this case.

Dr. Lewis.

Oct 9 '06.

Bladder: Serous. Muscular, Perio^{con. tissue} as interstitial,
mucous Membrane. size? first to much larger.

Muscle Ex. Long. Int. Cir. Serous coat 3/8 Post. Summit &
3/8 Ant. Bladder has summit, body, & base or fundus.

Trigone in inferior part of Bladder
not in folds or rugae. cause: it has 
no areolar tissue. Here ^{are} openings of Ureters.

Post. Trigone is 'bas pond'. Interureteric
fold an elevation from one Ureter to another.
bas pond somewhat deeper.

Testes secrete Sperm. sent thro Tab of Epid.
thro Epid. Excretory organ. Then thro Vas Deferens
around bladder? to Ampulla of Uterus. then
into Seminal Vesicle (reservoir of Semen).

Urethra. Mucous. Muscular

809 in. Open 3 min in 24 hrs.

Prostatic portion, Membranous. (compressor urethrae).

Bulbous. Cavernous.

Physiological Ant. & Post. divided by cut of Muscle.

External Sphincter at Base of Prostate.

Meatus Smallest portion 24.

Fossa Navicularis 32.

Githmus 28.

Cavernous Sin 30.

Bulbous 35.

Membranous 28

Prostatic gradual increase 30-35-

Oct 23.06. Mucous Membrane of Urethra is same continuing to the Hilum of the Kidney. Mucous layer composed of 2 layers Epithelial & Subepithelial Base of Bladder Epithelial is pavement. Glands of Urethra are Little & Morgagni
 Anterior of Urethra is Spongy. Post part muscular - erectile tissue.
 Prostate Gland funnel shape $\begin{cases} \text{muscular} - \text{Base} \\ \text{glandular} - \text{apex} \\ \text{supportive} \end{cases}$

Irritation of Prostatic urethra causes desire to urinate.

Pudic Nerve supplies Anus Perineum, Urethra, Prostate. Sympathetic Base Prostate.

Dorsal Vein empties into plexus around Prostate. also Sup. Hemorrhoidal Veins. & Veins from Bladder.

Blenorrhoea, Tripper, Gonorrhoea. Virulent, Contagious, Inflamm of Mucous Membr. Specific disease. Gonococci develop by a process of segmentation in two parts. Stain by Gram & decolored by after stains. Epithelial & Subepithelial (cont.) attack connective substance. Connective acts as a barrier. 4 stages. 1. Incub, 2. proliferation, 3. stationary & decline.

Dec. 4. 06. Bullhead Clap. fore skin swell & is caught back of Glans Penis. - Periphymosis. - lodged behind Glans. Infection got behind Cut off muscle 90% cases. get back thro lymph. & Continuity.

Dec. 10, 06. Post. Urethral Infection. stationary & Decline stage.

1. frequent Micturition 1. Double glass test.
 2. Urgent. " 2. May be blood.

Phosphates clear up with acetic acid.

Urates " " " Heat.

Treatment: Kill causative agents without harming tissues. Local & Internal. Silver Salt locally. Argrol. 2 to 10%. Permang. Potash $\frac{1}{10}$ to $\frac{1}{50}$. Protargol $\frac{1}{2}$ to $\frac{1}{10}$. Achromin 2 to 5%. For Int. Infection use Penicillin Syringe & IF good sized No 23. holds $\frac{1}{2}$ oz. which fills ureth. Urethra. Moderately warm. inject 4 times a day. Relax Body & Mind. use

Dec. 17. 06 a little so in Pancreas. Urine is barometer. 2nd glass clears first. Prostatitis Inflamm of Glans & Urethra.

Jan. 7. 07. Stricture { a. Congenital. } organic { Traumatic. }
 { B. Acquired. } { Inflamm. }
 Inflamm. { gonorrheal. }
 { Chancroidal. }
 { Mast. br. p. }
 { Chemical. }

3. { Linear. —
 { Angular. —
 { Tortuous. —

Stricture is an abnormal lack of dilatibility.
 Compression (the three seat) & spasmodic stricture.
 gon. Inflamm. Organic Stricture most common.
 Urine tries to sap into con. tissue & there is
 deposition of white cells & lymph cells.

this may organize to tissue then to connective
 tissue. Bulbo Membr. site 2/3 cases.

Gleet: chronic deposition secretes mucoid discharge.
 Indicates stricture.

Jan. 21. 07. Stricture may be caused reflexly by Emegma under
 foreskin ant. Stricture. Remove cause so stricture
 narrow. twisted stream / urine - more force.
 Change in Char. Stream
 pref. urination.

Gleet is a sac-like div. from urethra, mucous
 Pus. Corp. resistant. Over supply of Mucus. is a
 symptom of Stricture.

Must examine. Sound. Bulb.

Deeper stricture the narrower. begin with large sound.

Don't pass Bulb sound beyond cut off muscle.

Cut off Muscle does not obstruct steel sound. but if
 stricture is there it will stop large size.

Per rectum absence of Prostate in Str. there.

Feb. 4. 07. Don't go below 18 French sound.

any size stopped by cut off muscle.

use steel sound to pass cut off muscle. next use soft
 silk catheter then fill with bougie. (whalebone)

Different strictures differently treated.

Young stricture may be removed by massage. older
 are not. Location is considered in treatment.

Meatus must be cut. Internal urethrotomy

in well established structure within 4 in. 2 meatus.
 In forming structure use massage, caustics,
 Don't cut deeper than 4 in. or protect with external
 urethrotomy. use cutting 2 Meatus more than
 size wanted. or floor in with mus & meatus.
 Internal urethrotomy on floor of roof with all urethrotomy
 use anaesthesia local. Solution of Cocain or Alyssein.
 in same strength 2-5%. or tablet by Depositor
 Assent! holds penis & instrument & Operator
 dilates urethra & when tense or to proper Diameter.
 then incise once or twice in bulb round &
 as if properly incised. Loosen slightly &
 withdraw at same time. Keep using bulb sound.
 Wash with hot water Keep on using bulb sound.
 at first every 3 day - 4 days. 7-1 mo.

Mar. 4.07. 3rd lobes of Prostate Post Commune usually is
 Pathological. 60 yrs. Senile Hypertrophy
 Fibrous. Glandular & fibroglandular hypertrophy.
 form, growth: lobes grow up & Bladder. Laterally
 & infer a narrow slit in urethra. Cigarette form.
 Barterq. of Post. Com. Large not Projected Stream.
 frequently of urination at night usually.
 Residual Urine favors infection.

1. find out if gland is enlarged.
2. " " " there be ~~constriction~~ obstruction
3. form of obstruction.
4. Diag. ^{with reference} to other organs.
5. May be contraction without hyper P.

- Why. {
1. found out by palpation per rectum
 2. Urinate then pass Catheter & get residual urine.
 3. Cystoscopic examination. retrospective view.
 4. Exam. Urine. Catheter urine.

Feb. 1 '07. Dietetics is the science & arts of choice & preparation of food. Science includes 1. a knowledge of Metabolism. 2. Hygiene sufficient to show effect on normal individuals. 3. Therapeutics diseased .. 4. Physics & Phy. Chem. digestibility of food stuff.

Metabolism: is the science which teaches us the process by which food stuffs are built up into living tissue & protoplasm. or process by which we oxidize food stuff to give us heat & energy.

Digestibility is the process by which foodstuffs are changed chemically & mechanically that they may be absorbed.

1. Kind of food. 2. Preparation of food. 3. Condition of individual.

Absorption: is process by which food is taken up by walls of canal & passed into blood. depends on.

1. Filtration. 2. Dialysis. 3. Hydrostatic Pressure. 4. Osmosis. 5. Due to Chemical changes.

Food Stuffs:

Carbohydrates, fats, Proteids, Mineral Salts.

Digestion of Carbohydrates: 1. Starch. Dextrin, gums are changed to Maltose by saliva & Pancre.

2. Dextrose, Levulose, Galactose,

3. Disaccharides 1. Maltose. 2. Cane sugar, Lactose.

Carbohydrates:

Absorption must be as normal Dextrose 0.1

Metabolism. 1. affected by liver so that excess of dextrose is stored up as glycogen.

2. affected by pancreas 3. affected by nervous system.

What becomes of Carbohydrates? 1. changed to CO_2 & water (heat & energy)

2. Part of Carbohydrates are laid down as fat.

3. Pathologically. Carbohydrates are not oxidized.

Fats: Stearin.

Oleam, Palmitin Buterin { 92% Buterin. Stearin

Butter has 92% Vol. 8% nonvol.

Oleo. M. Oleam, Caproic, Caprylin, Capric 98% Vol.

Digest of fats 1. Mouth no changes 2. Stomach but little.

3. Digested in intestines split up into fatty acid & glycerine are absorbed. { glycerine
fatty acids as soap. remain in passing this intest & exist as fat in blood.

Feb. 8. 07. Fat: Metabolism.

1. Heat generated.
2. Energy liberated.
3. Excess fat ingested stored up.

Proteins. I Simple. II. Compound. III albuminoids.

- II. 1. Mucin. { Sug.
 { gly. Proteids.
2. Haemoglobin.
 3. Nucleo Proteid.

I. Albumin.

1. Serum.

2. Egg.

3. Lact.

globulins.

1. Serum.

2. Lact.

albuminates. { acid
 { alkali.

nucleo albumin - Casein.

Albumoses

Peptones.

III. Supporting tissues of Body.

1. Gelatin.

2. Chondrin.

3. Keratin.

4. Reticulin.

Digestion of Proteins:

Mouth - Masticated. - Mechanical.

Stomach - 1. Native Proteid by acid gives acid alb. or syntonin. then Albumoses then Peptones. Peptones are absorbed others pass on.

Intestinal: Proteid to alkali alb. - albumoses - Peptones. Amido Acids - Hexone bases.

Absorption of Proteins: ?

Mouth - None.

Stomach - Peptones. Must be transformed is poisonous

Must change in mucosa. Pep. | Serum alb.

Intestine - Some Peptone is absorbed as St.

Serum glob.

Absorpt. Amido Acids & Hexone Bases.

amido acids { to Serum Alb.
 Hexone Bases { .. Glob.

Metabolism:

1. Some of Protein is built up to new tissue. Protoplasm.
2. Part of Protein is oxidized at once. 1. Heat. 2. Energy.
3. Proteins some transform into carbohydrates.
4. Possible some may be stored up as fat.
5. Part gelatin never built to Protoplasm.
 .. oxidized at once.

End products of Protein Metabolism.

1. Broken down cells.
2. Oxidized Proteins.
 Urea. Uric acid. Creatinin. Creatin. Ammonia.
 Water. CO_2 . Sulphates. Indol. Skatol. tryptophan
 Leucin. Tyrosin. Amm. Carbamate. NH_3 Lactate.
 Xanthin Bases. Many end products contain
 C_6 & are converted into Carbohydrates.

Nitrogenous Equilibrium:

Body Equi. is state where ingested food
 & Excreted Products are the same.
 is that state of Met. in which ingested N. is the
 same as the Excreted N.

Mar. 107. Income of Energy.

1. To determine energy must have amt. of intake.
2. Must know amt. of food which can be absorbed.
3. Must have certain unit to measure energy.
Unit is calorie. amt. of heat necessary to raise 1 gm.
Dist. Water 1°. Small Cal. 0° & 1°. Large is 1 Kg.

Heat value of food stuffs in Calories.

1. Proteins - Change to urea 1 gm. Dry Protein = 4.1 Cal.
2. Carbohydrates. $C_6H_{12}O_6$ & alcohol. " Carbo Hy = 4.1 "
3. Fat. " " = 9.3 "

Isodynamic value of food stuffs.

100 gm. Proteins = 100 Carbohydrates.

100 gm. fat = 227 gm Prot or Carbohy.
natural.

7.6% water

15.1% Protein

7.1% fat. 410 Cal Calophoric value.

68.2% Carbo Hy.

2% Salts.

Mother's milk.

Water 87.

Solids 12.6

Proteins 2.3%. 1 lb. gives 319 Cal.

Fat. 3.8%. 1 .. Cows. 318 ..

Milk Sug. 6.2 ..

Ash .3 ..

Calories required in 24 hrs. 70 Kg.

2240 Cal. for starving man & ordinary work

add 118 14% = about 3200 Calories.

118 gm Pr.

37 .. fat.

500 .. Carbo Hy.

{ amt. for 24 hrs -

Mar 8. 07. 5.4 gm. N. in 24 hrs. $\times 625^{\text{C.F.}} = 3.3.75$ amt Protein.
 40 gm. Protein by Chittenden. in 18 mos. instead of 118.
 In all he took 1500 C.

For good nutrition. 1. Proper Diet - mixed -.

2. Proper number of Calories.

3. Regular periods of feeding.

4. Frequency.

5. Variety.

6. Appearance.

7. Temperature 98° .

8. Highly Seasoned -.

9. Rest before a meal.

10. " after " .

11. Emotions.

Mar. 15. 07. Milk. Water 84-90.

Solids 87° organic & mineral

Casein & Lact alb. org } cows.

6 - 1

1 - 2 - Woman's.

Fat. 4% Cows. + Woman's.

Lactose. (Gal & Deab.) 3.8 or 4% Cows. 6% Woman's.

Mineral M. $.7$ Cows. $.2$ Mother's. $\text{Ca}(\text{PO}_4)_2$, K_2CO_3 , NaCl,

adulteration.

1. add Water.

Sp. g. 1030.

2. Removal of fat.

Preservation:

1. Cold. - freezing. Denmark.

2. Heat - Boiling - sterilized. - Pasteurized.

3. Preservatives. Salicylic A. Boric. Formaldehyde. Alcohol.

Digestion:

1. Curd. { Renin.
 { HCl.

2. Casein is digested. Acid alb. albumoses & Peptones.

Barley water P.P. Curd in fine flakes.

Oatmeal .

Sodium Citrate 1-3 grs to pint.

Predigested milk - Peptonized milk. -

1. Peptonized.

2. Pancreatized.

Carbonated water or fruit juice for taste.

Fairchild's Tub. 5 grs. Pancre. Ext.

10-15 grs. Na_2CO_3 . $\frac{1}{2}$ for 1 pt. milk.

Humanized milk:

Condensed milk. Sweet & unsweet.

Normal Variations: - Mother's milk. -

first wk. fats in excess. others small.

3 wk. is 6.7 C. 40 fats 2/6 P.

7 Mo. Decrease Proteins & fats.

Modify Mother's milk:

1. Increase fat. - increase protein.

2. Decrease .. - Reverse.

other elements not changed by diet.

3. Increase Proteins - decrease exercise.

4. Decrease .. - Exercise to point of fatigue.

5. Carbohydrates remain constant.

6. Increase quantity - increase liquid.

7. Decrease .. - Cathartics & decrease liquid.

Mar. 22. '07. Clinical method to determine fats & Proteids.

1. Carbohydrates remain constant.

2. Inc. fats. decrease Sp. gr.

3. .. Proteids inc.

Determine fats grad. t.t. 100 cc fresh milk set in cool place 24 hrs. this graduate gives amount of cream the ratio of cream & fat is 5:3.

Normal Sp. gr. & norm fat. eq. constant milk is normal.

Normal Sp. gr. 1029-33.

Scanty } Rich. modify by inc. liquids. beer.
Poor. } Inc. lig.

Inc. Proteids

Less Exercise.

Baby feeding.

1. Breast fed.

2. Wet nurse

3. mixed feeding. Breast. { alternate.
Bottle.

4. Artificial or Modified.

Reasons for modifying Cows milk.

1. Fats are same.
2. Sug. is low.
3. Proteins too high.
4. Casein to alb. 6 to 1. 1-2 in Mothers.
5. Casein Coag. large & compact.

Ways of modifying milk.

1. Diluting.
2. Peptonizing remove all or part of Casein.
3. Adding Botanical water. Barley & Malt Extract.

Nursing Periods:

1st up to 3 or 4 Months.

Sug. 5% fat 2-3% Protein 1.5%

2nd up 4-9 Mo. Sug. 7% Prot. 2% fat 4%

3rd 9-12-14 " " 2 1/2-5% " 2 1/2% " 4%

April 5.07. Of 1000 children 430 more die than those fed on mod. milk.

Requirements for Infant:

1-3 Mo:	fats to Proteins 3 to 1.	3% fats. 1% Proteins.
3-6 "	" " " 2 to 1.	4-5% " 2 1/2% " "
6-12 "	" " " 1-1.	4-5% " 4% " "

Carbohydrates constant 4 to 5%.

Baby 3mo. old. fats 3%. Sugar 4-5% Proteins 1%. Lime water 5% total. 8 feedings. Aint 4 oz.

Jerseys: 1/4 Water to milk.

Nol. Chathams: Poor add cream.

Gravity Cream: 16 to 17% fat Carbo & Proteins same.

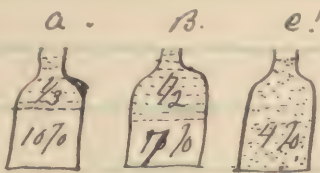
Centrifugal " 16-40% " " nearly "

Top. milk cream.

Method of removing Cream.

- | | | |
|------------------|-------------------------------|----------------|
| 1. Pouring milk. | } use upper 1/3 for 1 Period. | |
| 2. Syphon. | | " " 1/2 " 2. " |
| 3. Chapin cup. | | use all " 3 " |

April 12. 07. Home or Country Style:



a. - first trimester. syphon off with glass syphon.
 B. second ..
 c. Third ..

Mix 20 ounces for 5 feedings.

1 oz of lime water.

6 $\frac{1}{2}$ 10% milk.

1 $\frac{1}{2}$ milk sugar.

Water q.s.

$\frac{7}{10}$ fat from 'a' = $\frac{1}{2}$ no 7 oz. taken.

2 oz milk $\frac{10}{100}$ fat. 1% Sug 5.5 Prot. $\frac{1}{3}$ 7%.

4 2 2 1%.

Barley Water or oatmeal gruel may be exchanged
 for lime water or 1 gr. to oz food of Na. Citrate.
 Sodii Bicarb has also been used.

Physical Diagnosis. Brief Summary.

Physical Diagnosis or Diagnostics is the application of our sense organs for detection of disease.

When Patient enters things to be observed are:

Inspection 1st Gait. comparing it with a healthy person, manner, position etc.

2nd Condition of Nutrition under 3 heads.

a. Skeleton. whether his make up is of a coarse or finer nature.

b. Musculature. always examine when muscle is at work, as have him contract his biceps etc.

c. Adipose tissue under 3 heads determined by
1st color of skin, the lighter & more beautiful the skin the more fat underlying.

Most beautiful in children next in ladies always examine underposed parts, abdomen etc.

2nd By prominence of bony parts and surface outline of muscles etc.

3rd By Palpation skin should be smooth where subcutaneous tissue is present & when it feels dry it shows that the fat has been atrophied from the vessels.

3rd Skin: color, dryness, moisture, roughness, smoothness, swellings, depressions etc.

Inspection of General Build & Nutrition.

& fair influence of Nervous System on muscular system.

Build: Heredity plays a great role. some sickly habits show up on individual

Physical Habitus & disproportion between Height & Breadth.

Flat people have fat around heart & in abdomen & make examination

very unsatisfactory

Inspect skin surface & appendages
Eyes Sclera Conjunct etc.

Visible mucous membranes
Eyes Lips & Mouth.

Lips each extreme amount of
circulation as are pale or blue -
should be red.

Pale - Pallor

Blue - Cyanotic

Sub blue - Liver tuid

The redness of the lips is due to color
of blood sent thru the thin mucous
membrane & in case of Cyanosis the
blood has changed color & the capillaries
are filled with deoxygenated blood.

This Cyanosis may be due to a sluggish
circulation & is due almost entirely
to circulatory disturbance.

Picrotoxin causes a yellow discoloration

Bile Pigment - Icterus - pink in line
icterus Disease - jaundice

Cyanosis due to

a. Circulatory Disturbance & b. Respiratory
a. Congenital Heart Disease

b. Opening between heart & vessels

Foramen Ovale.

Septum to Pulmonary Artery.

Stenosis of Pulmonary Artery.

Right Ventricular Failure & consequent
congestion of blood in capillaries.

Opening exists between Pulmonary Artery &
Aorta & Ventricle Botelli & this may cause a
mixture to take place & when they obliterate
a Stenosis may form. This may be diagnosed by
examining the femoral pulse which is weak
unfilled & occurs later.

2. Bleeding Between Pulv. & Endo.

3. Stricture of Pul. Orifice.

4. Heart Disease

Decompensated Blood Disturbance.

5. Local Blood Vessel Disease

6. Stenosis of Aortic Orifice

Disturbance within Lung

Heart Diseases. Cardiopathies -

1. Myo Carditis disease. Cyanosis.

2. Valvular Diseases

Valvular Disease is not serious only when complicated by disease of Myocardium.

May have Endocarditis without being associated with valve ^{murmurs} & this always involves a portion of the Myocardium.

In Stenosis & Insufficiency of Mitral valve only leads to symptoms of Cyanosis.

Respiratory.

1. Bronchus Pneumonia.

Emphysema.

Examination of Left Ventricle

1. Pulse.

2. Strong first sound of Heart

Right Ventricle.

Listen to 2nd Pul. Sound.

3. Phthisis.

General & Localized Cyanosis.

A. A nervous disorder.

Local Vasomotor Paralysis.

B. Interference External or internal occlusion of large veins.

Thrombosis.

Paleness: Lack of R^{ed} amt. of Bld. (Oligemia)

1. Real Oligemia 136. Excess of Hb.

2. Decrease in R^{ed} amt. in Bld. 136. 3. Disturbance of

Hypochromic globulins

Nutrition

Temporary Paleness.

Local Paleness.

Permanent

General

Causes for Temporary Paleness.

I a. Temporary Circulatory Disturbance.

B. " Blood Supply Deficiency

A. Due to Spasm in Arteries due to
a stimulation of Vaso Constrictor Nerves.

Atonia Cordis (Paralysis of Heart)

Fainting Spell by temporary relaxation

Acute Anemia of Brain. & Muscles of H. & L.

Days & Weeks after Hemorrhage.

II Permanent Paleness.

Diminished Blood Supply.

a, Continued Hemorrhage.

Intestine Parasite *botrioccephalus latus* sucks blood.*Ankylostomiasis*.*Ankylostomia Doudenale* affect
people in N. & S. tunnel diggers.*Trichocephalus Dispar*

B. Primary Blood Diseases.

(Chlorosis, Leucemia,

Progressive Pernicious Anemia)

C. Diseases associated with loss of
tissue juice (Nephritis)

D Disease interfering with nutrition

Jan. 23. 06.

Diminution of Sec. Work.

1. Terminology

a. Reduction of Entire Secretion (Achyilia) (as prophylic)

b.

Inspection of Chest.

1.

2.

3.

4.

Surface

Shape

Cur. Mov.

Resp. Mov.

a. Vessels - Veins.

large veins. - locality of.

venous radicles (intercostal Veins (agg. nonagg)).

big gap veins at lower thoracic aperture.

seen before V. Rad.

seen between Peck. Mx. & Rectus Ab.

Brownish. yellowish spots scales

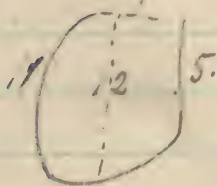
Petzrisis Vesiculos.

expressive of Weak constitution. (Late stages T.B.).

2. Shapes.

Ch. Walls are abnormal (Ruffles)

Phy. Heteromorphism.



1. Nipple.

2. Sternum. (Angulus Ludovici).

Zyphoid protruding

St. Fissura.

Perforatum.

3. Lateral parts

4. Spine

Upper & Middle Dorsal Part } deviates to Right Side.
Absent in Left. Wanded usually.

Abnormal Conditions.

1. Spinal Column first.

Kyphosis - Curvatura Arcuaria.

Angulus.

Due to Spondylitis suppurativa.

gradual atrophy.

Old Age. Senile Kyphosis.

Children up to 10 yrs + Men use Diaphragm
Women Int. Costal + Diaphragm M.

Reason of gas. tone. (Eckle's Respiratory
center. As help in Thoracic).

1 to 4 Normal. Changes in respiration
corresponding to disease of the trunk &
outside of H. & Lung.

Points of Breathing.

1. Normal Chest Wall, 2. Muscle + Bone.

3. ~~Excess~~ Normal respiratory surface.

4. Normal Cond. of B. +

Tachypnoea. fast.

Spasmodic. slow

Change of time. Difficult. Inspir. or Expir.

Dyspnoea: Difficult breathing.

Volumen. Auctum. Inspiration. Insp. power
to Contract. Inc. use of Lat. + thing.

u Born by one side than the other.

Chorea Strokes - Cerebral Disturbance or
acute Neuritis + Alcoholism.

Letten's Phren. is with Diaphragm Breathing

Disease of Throat. *Oridium albicans*.

Oral Cavity. White Patches in Mucous Membrane of Mouth.

Tr. remove with Curet. Wash. Boil acid etc.

Warm, liquid & foods. milk. Mucous acts
against B. act. in mouth. keep mouth clean

15% Alcohol sol. of Thy. mol. 10 drops in warm W.

Tr. Krameria (Rathany) for gums apply
with cotton.

Diseases of Esophagus. Symptoms Dysphagia
Pain. Haem. regurgitation. H. n. to Cerebral
veins. or perforated aneurisms. Ulcer of Stomach.

Dysphagia due to paralysis of muscles, constriction
or new formation which may be outside or
inside Extra are Mediastinal Tumor. large

Bronchial lymph glands, aneurisms.

Pericardial exudates Pain mostly in

ulcers. Regurgitation of As. ibens. H. A.
 excessive mixture Saliva. No odor
 from stomach, or in Esoph. Look for
 Paralysis of Local Cord is to Condition of Reck.
 Cachexial associated with Malignant growth
 Insper neck or anus. Diverticulosis
 & may be felt near X, passed use
 Bougie for exam. don't all were introducing
 -ing v. High. They are imp. inent
 + then act of it to use low. in
 introducing have patient breathe deeply.
 Don't tell patient before hand.
 Phthisical Habitus. Tuberculosis.

Phthisis.

100° Tem + Under. is Tuberculosis.

Higher Temp. is Phthisis.

Le. isis Mucosa

Tubes. consumption? Park's Cord.

Phthisical Habitus { Acquired.
 Congenital.

1878 Column transmission of Cherry material.

1882. 1/2 inch. Green discolor.

Phthisical Habitus.

Bronchiectasia -

Chronic Pneumonia -

Pneumonia -

Tuberculosis.

Consumption.

Upper Thoracic Aperture.

W. Caries to glands. Stick down mouth to upper
 portion of Lung. Harrowing? Stems Vert. Diameter.
 & much down also Cavities. & bone Cavities.

grooves. Should get glands from examination
 of Trachea. Wing shape ~~apexes~~ Chest wall
 Scurvy. long. large space deeply for tubercle.
 (Parag. 100. x.)

Diseases of Esophagus. Rupture. Disturbances
of Vessels lymph & veins. Inflammatory Cond.
Acute & Chronic infections; Parasites.
Neoplasms, Cancer Chief one.
Large doses of Bismuth Subnitrate.

Dec. 2, 05. Pancreas - Compound Tubular gland.

Zymogen granules

Clear, Watery Secretion 1.0075 Sp.

Alkaline Na Carbonate.

500 to 600 cc a day.

Trypsinogen

Lipase - Steapsin

Amylase

Ribonuclease

Lactase

Protein

Proteoses

Peptone

Pancreatic juice cannot dissolve proteins when it first comes out but in intestine by action of Enterokinase Trypsinogen is converted into Trypsin.

Peptone { Amino acid, glycerol, leucine, } Tissue Protein
 { Amino acid, Lysine, }
 Peptide - Nuclein

Peptone cannot be found in blood

Trypsin in Intestine attacks peptone. { two reasons why Proteins are not absorbed as peptone.

1. Amylase action starch & splits into Sugar.

2. Lipase fat splitting enzyme. is reversible.

Pancreatic Juice helps Emulsify fats.

splits into Glycerine & fatty acid. before absorption.

Lactase splits Lactose not present unless

there is ~~lactose~~ milk diet.

Secretory Nerves.

Secretin substance formed in Intestine which when comes to Pancreas causes Secretion.

formed by action of acid.

Movements of Alimentary Canal.

1. Deglutition - Raise & push back tongue pushes food into Pharynx. Soft palate closes

opening of Naso. Pharynx raises

Muscles of Pharynx contract & force food into Esophagus. Reflex peristalsis

1. Esophagus force food down. first part is the striated fiber. liquid goes fast.

2. Cardia Receptive

3. Pyloric Churn

after food enters peristaltic waves regularly over Pylorus causes churning.

18-20-19-59-20 3 per Minute.

Occasionally Pylorus opens

Esophagus (similar to Intestine

Constriction behind & relaxation in front

(Bayliss & Starling Law) Divide in 8 sec

This wave of contraction moves & aids absorption. No Antiperistalsis this peristalsis is local reflexion.

Such sound heard in same spot for 1/2 hrs. by Cannon.

Antiperistalsis in Large Intestines

& by these means Curries pass back to Small Intestines but not fetal M.

Liver { External Secretion - Bile.

Internal .. poured back in blood

a sugar glycogen function.

s. urea.

Bile 500 to 800 cc per day.

Bilirubin { Derived from haemoglobin from Biliverdin { Decomposed R.B. corpuscles.

Urobilin excretory products.

Bile acids found as Bile salts. Glycolic Acid

Derived from proteins

Thurocholic ..

Dissolve salts & help absorb same. Stimulant for work itself (Cholagogue).

Secretion stimulates liver. Destruction of RBC

causes increase in Bile.

Glycogen $C_6H_{12}O_6$ - Comes from or is formed from

Sugar in Portal vein. glucose, lactose

Glactose may form glycogen.

.. to .2% Sugar in Blood. Liver is governor

Urea chief product of N. excretion

Spleen may be taken out not absolutely vital During digestion increases in size

Has Rhythmic Contraction every minute.
 Spleen { 1. Make R.B.C. - fetal life, after hemorrhage.
 2. Destroy "
 3. Production of Lymphocytes.
 4. " " " " " " " " " " " "
 5. " " " " " " " " " " " "

Kidney

Oct. 9. 06. Skin Diseases. Duncan.

Skin contains Muscular fibers. both kinds.

Smooth Muscle of most import.

Sebaceous Glands. Sweat Gland.

Sweat glands assist in maintaining body heat
 Nails & Hairs appendages.

Function: Protection, deeper structures
 maintain normal colour & outline of body.

Location of sensation? Skin. in papillary
 layer some of them. 10. some extend a sense
 of respiration. Power of Absorption.

Property of Regulation of Temperature. Secreting
 & Excreting organ.

General Symptomatology: Subjective & Objective (Clinical signs).

Lesion { Primary
 Secondary or consecutive.

Lesion is the breaking out or eruption.

Primary lesion is one representing the first
 manifestation or appearance.

Secondary are those which come afterward.

8. Primary. Macule. Wheal, Papule, Tubercle,
 tumor, Pimple. Pustule. Vesicle.

7. Secondary. Crust, fissure, excoriation,
 scar, scale, fissure, pigmentation

Oct. 16. 06. Subjective & Objective Symptoms.

Itching most common. Primary are lesions which characterize
 the original eruption.

(Prim) Macule & Wheal (Sec) Crusts, excoriations, fissures
 Tubercle. Papule. Tumor pigmentation scar scales ulcer
 Vesicle Pimple.
 Pustule.

General Diagnosis. occupation, time. Expose Body
Microscope. Gen. Treatment:

Oct. 30.06. Gutta Serena & flex. Collodion for fixed dressings.
Caustics. Irritants. Arsenious Acid.

Electricity faradism / little value. Electrolysis
is of value in destruction / growths.

X Ray. Classification of Diseases:

1. Hyperemias. 2. Inflammations or Exudation.
3. Hemorrhage. 4. Hypertrophies.
5. Atrophies. 6. New growth. Neoplasms.
7. Neuroses. 8. Diseases of Appendages.
9. Parasitic.

1. Hyperemia increased flow of blood & apart
without path. cond. Produces a redness called
Erythema. Simple & Intertreco. are char.
of this form. Simple form is "idiopathic"
or "symptomatic" in cause. 1. cause is External.
2. Cause usually internal. In either form pressure
causes them to disappear. Abandon cause for
treatment. Intertreco occurs on opposed surfaces.

Nov. 13.06. 2. Inflammations or Exudation.

Multiform Erythema. inflam disease of skin characterized
by various lesions. Papular chert form Eruption.

Papules are large & irregular. look like warts but don't come & go suddenly.
Location is back of hand & forearm. Dull red. No subjective symptoms.
occurs with Rheumatism. Erythema Nodosum. Characterized.

by tumor like elevations or nodes. Confined to limbs mostly.
Looks like bruise. somewhat painful. various colors. looks like
pus in it but don't open pus is not present.

Urticaria Nettle Rash. Gives. Char. by Wheals. which come
& go suddenly. burning, tingling, itching! any part of body. internal
& local causes. Ergot / Raticy. Prurigo.

Nov. 20.06. Lichen ^{Planes} inflam. condition. like moss in later stages.
char. by papules. intense itching. very chronic. lasts a few
weeks occurs usually but once. Forearms & sides of Chests most
common beginning. Seldom on face. probably neuritic.
Papules differ from all others in that they have a flat top.

slightly glazed over the top later may have an umbilication in ~~some~~ they are dark red. They may become diffuse & form patches which are somewhat glazed. Dry disease. Base of papules is irregular. most common in adult not in extremes common. more in women 7/10 lasts from 1 to 3 or more months. seldom returns. Old treatment was arsenic. Mercury internally as in syphilis.

Protiodidi / Mercury $\frac{1}{2}$ gr - 3 times a day -
Use antipruritics Bichloride, Menthol & in water.
Itching is worse at night.

Psoriasis inflamed condition characterized by scaly papules. It is a chronic disease. Papules are scaly from beginning. loosely attached. removing clothes scales may fall & floor. itching is slight. comes in spring & fall mostly. Is not parasitic. Dry disease.

May be found in Rheumatics. Prognosis good under proper treatment. Internal & Externally Arsenic internally alkaline treatment after. Very little red meat.

Psoriasis never ulcerates. Cannot bathe too often. Baking Soda in bath. Habra's green Soap. then some stimulating

Nov. 27. 06 ointment. ^{Chrysarobine} ~~Cresorobine~~ most effective local application. mix this with Cocoa butter. Cresorobine pigment not so effective. Causes Dermatitis so put on at one part of the body at a time. Do not use in hair or around eyes.

Eczema. 3/4 are a form of Eczema. Tettn, Saltroome. is a cutaneous Catarrh. Moisture present.

May be acute or chronic. Chronic where skin is thick white may break out on this. Not contagious.

not inherited as a rule. Multifarious disease. Come at all everything.

Eczema in patches are ill defined shades of etc. intensely itching disease Four Cardinal Symptoms of any Eczema are 1. Redness. 2. Moisture or weeping. 3. Infiltration & thickening 4. Itching. Principal varieties are four.

1. Erythematous. 2. Papillary. 3. Vesicular. 4. Pustular.

Dec. 4. 06. Squamous & Erythema are secondary. Etiology may be local or internal. May have some predisposition

Pro: a curable disease. Diagnosis: Psoriasis is scattered over body. healthy skin between. not on face. always dry. always scaly. Exema in axilla etc. Scleroderma scaly removed in rolls others are brittle. Spots are anaemic. Scabies usually on hands etc. Impetigo Contagiosa: mostly in children. on hands face. pustules are flacid & flat.

Dec. 13. 06 Erysipelas. local or general erythema. differentiation. Duncan. Erysipelas is infectious, increase pulse. fever. heat over inflamed part. swollen, tense, shining etc. Pruritus no eruption whatever.

Papillary Exema & Lichen Planus: see character of papules. no return in E. P. Papules are flat top, glazed, pitted, dry. Papillary, Pustular Exema & Acne. Acne no itching mostly on face. young people. Comedones between. Continually chronic.

Ring Worms. (Trichophytoses) Spores under microscope ^{non Parasitic}. Syphilis: from pustular Exema. occurs about hairy parts. Upper lip intervening skin is healthy. thro every pustule is a hair. is Perifolliculitis.

Erythema: lesions are wheals, come & go suddenly.

Dec. 20. 06 Local Exema: Anus quite favorable. also External Genitalia / Male & female. Principal causes are fistulae, fissure, threadworms, ulcers, Hemorrhoids. Examine Vag & Uterus. Leucorrhoea & Diabetes.

Hands another favorable place. back & palm. poor soap. lot of water not dried. Infantile Exema, vesicular & Pustular break down form crust. yellowish brownish. weeping. itching.

Treatment. No Positive cure. Acutely Inflammatory requires mild application. - soothing. - In thickening & infiltration - medicines should be more stimulating - Do not use water in acutely inflamed condition. Later Olive Soap - Habermas in chronic cases. Don't leave soap on & dry immediately & apply ointment. Make applications continuously.

Treatment / Exema Rubrum. An leg. / All People especially. - Examine carefully for Varicose Veins. - Surgeon or Rubber Bands. Exema does not ulcerate. Rubber stockings not so good. Get plain Rubber not web. For itching: Carbolic Acid just to point of slight tingling sensation. Let Patient prepare it. Camphorated Chloral^{ointment} for localized Exema. gum Camphor. Hydrate / Chloral equal parts & rub down to semi-solid. One Dram of this to ounce of Vehicle. Cold Cream or other. Hot application may give temporary relief for a local application.

Herpes Very Common. - (Herpes - to crawl.) Vesicular & nothing else.

Herpes Simplex is an acute inflammatory disease of skin char. by vesicles. & these vesicles mostly clustered. They do not tend to rupture. No pronounced subjective symptoms. Favorite conditions / location is on Lips & Perine or Vulva. History / Previous attacks. Herpes / Penis should not be mistaken for either form of Chancre. They have occurred previously etc. pass away in a few days. May have begun in small Papules.

Jan. 10. '07. Vesicular acute no pronounced subjective symptoms. Vesicles do not tend to break - are large as a rule. Causes: often found under long fore skin. Cleanliness & Circumcision.

Herpes Zoster, Shingles or Zona. Char. by clustered vesicles accompanied by pain in part. Along course of nerve. Intercostal Situation frequent. Irritation of Post. Root Gang. they become inflamed & nerve sheath becomes inflamed. It is a descending neuritis. Sudden change of Temperature. usually unilateral. Don't break the vesicles Protect Vesicles. Usually only one attack.

Cheiropompholyx. Vesicular disease, on hands & feet. they are deep seated like scabs usually on sides of fingers. Outcome: entire outer skin exfoliated. Itching burning. Pain. Tend to recur. Treatment: Soothe don't irritate. Immerse in hot water in aggravated cases. Oleo Colloidum in some cases.

Permphigus is acute or chronic char. by blbs. filled come out suddenly, surrounding erythema. May prove fatal shortly.

Impetigo inflam. cone. char by flattened pustules. Rather superficially placed. Most common in childhood. about face, fingers. Not numerous lesions. subj. sym. not severe, horrid looking sight. gets well of itself in a few wks. Deep clean. Seldom scars.

Impetigo Contagiosa. lesions are vesicles - pustules cloudy with contents.

Jan. 17. '07. Ecthyma? similar to above in old people is mildly inflam. large pustules, superficially situated break down into scabs. lower extremities usually. No subjective symptoms. Large Pustular Syphilide simulate. a hole under crust in Syphilis.

Dermatitis venerea. any artificial inflam. condition of skin. Poison Oak - ivy - Toxicodendron. Summer or fall chiefly. lesions are vesicles bunches on swollen parts. face skin oedematous. Eyes swollen ears also. Prog. good. Predisposes. Treatment: Fl. Ex. / green Alleei Robusta & drams to 4 & each of lime water & water soak clothes & apply to parts.

Dermatitis medicamentosa

" Facticia - feigned -

Jan. 24. '07. Haemorrhages: Diseases of Skin char. by Extrav. of blood into Cutaneous skin!

Purpura: An Extravasation of Bld. into skin. Not caused by Trauma. must be a disease of vessels themselves.

Non inflamm: etc. Path. cond. dulls hands.

3 forms: 1. Simple. 2. Rheumatic. 3. Haemorrhagic.
Bright red spots become darker later.

Pain in 2 & 3. No subjective sym. in simple. 1.

Most common in extremities. Spots cannot
be pressed out. Sp. on mangle.

Prognosis good.

Purpura Haemorrhagica - Land Scum - Bad prognosis.

Treatment: if in lower extrem. Bandage the parts.

Iron, quinine. Salicylates. Astringents N.G.

D. Diseases characterized by Hypertrophy.

1. Hyperpigment patches. Cause not known.
Sunlight increases them. Don't treat them.

2. Chloasma - Liver spots - diffused Hypertrophy.
Not due to liver. May be associated with ulcers
or skin trouble.

Treatment: 16 gr. Corrosive Sub. & 4 oz each
alcohol & water. Gradually flakes off skin.

Apply on cloth till tingling sensation is felt
apply twice ^{don't let patient get asleep} ~~at~~ p. Rub it.

This will relieve itching temporarily.

3. Nevis Pigmentosa. Mole.

Causes Hyper. & Pig. also in hypertrophy
skin tissue. May be hair on face from nose.
favor Epithelioma. Destroy to get rid of.
Electric needle. caustics / knife.

4. Clavus - Corn - Hypertrophy of horny layer.
Pain presses on nerve. Caused by pressure or friction.
Remove pressure. Pare Corn. use Corn plaster.
also. Brown flexible plates.

Jan. 31. 07. Callositas Hyper. Horny layer on hands & feet.
may be extreme & extensive.

Use Liq. Potash Caustic & mop it 25 to 50%

Dil Acetic acid to neutralize. then apply Salicylate
or Sapo Viridis. Keratosis Pilaris. Hyper. Horny
layer around a hair. itches & burns. Shoulders & arms
thighs in women mostly. Apply glycerine.

Hypertrophy? Papillary Caruqa (last)
Electric needle. Caustic. Salicylic acid. Camabus Oil.
Sulph. Mag. 3x a day. Hypertrophy of upper skin is.
Dethyosib like fish skin not on parts
exposed. scales like fish. more around joints.
is Congenital & incurable frequent bubbles
& grease only with oil will keep in good condition.

5. Atrophy:

Albinism & Vitiligo. atrophy of pigment
of skin. when congenital is albinism when
acquired the Vitiligo. Leucoderma another name.
most common in Brunettes. more. when in
spots make dark skin lighter.

6. New Growth. Neoplasm.

Heloid. means claw. Con. tis new growth
appearing on scar. Do not remove it. returns
more in tropics. I Ray may cure it. no cure.

Feb. 5.07. Mollusum Contagiosum. pin head & flat. solid
elevation. non inflam. a hole in center / mound.
no subjective symptoms. Pinkish or color of skin.
opening is duct from Sebaceous gland. Prog. good.
Operate for treatment. resembles Molluscum.

Xanthoma: Benign. Con. tis. New growth of skin
with deposition or degeneration fatty tissue in part.
fawn color. Usually on Eyelids. & face. may grow.
Excise only when rapidly growing. Xan. / Diabeticum.
Electric Needle.

Angioma: New growth of Bld. Vessels. Red. Color.

Telangeectasis which comes on later.


Vase. Nevi. .. at birth.

Incurable. small one may be removed slowly.

Bld. Vess. in Mucous Memb may be involved. Can be deep.

Semi Malignant: Tuberculosis. 1. TB. Cutis 2. Scrofula Dum.
3. Lupus Vulgaris.

Feb. 26. 07. Period of incubation important in differentiating.
 Chancres. 1 wk to several days. Chancroids less time.
 3 wks to 3 Mo. Cutaneous manifestations occur.
 Cutaneous Manifestations. Colors multiform
 rarely Vesicular in acquired. Vesicles & Blisters in babies.
 Early is more or less General. Configuration & Color.
 Not inflammatory is infiltration. Cherry like.
 Tends to become crescentic. No Subjective symptoms.
 Papillary may itch. Course & duration: Early may get well.
 Concomitant Syph. Sore throat, mucous Patch (Moist Papule).
 Iritis at times. Hair falls generally thin. headache. ~~excess~~
 rheumatism. anaemia.

Mar. 5. 07. *Tinea Versicolor*. from Macular Syphilide.
 Syphilis is in skin. *T. Versicolor* are on skin.
 Microscope  *Tinea Versicolor*. may have had this
 for some time. Comes only to collar line.
 Pityriasis Rosea Macule eruption dark color.
 Ask about eruption or Medicines taken.
 Eczema does not ulcerate.
 Papillary Syphilis from Keratosis.
 Lichen Planus. flat top papules.
 Pustular S. Later end of first year.
 small may be early. Ecthyma simulates
 large pustular syphilide. Ecthyma is a
 superficial inflammatory disease. S. is ulcerative
 destructive. Raise crust & in Ecthyma is just
 set on smooth skin. Ecthyma like Impetigo
 in young.

Mar. 12. 07. Some? scattered papules have ulcerated.
 Macular usually first then papule. Pustular not early.
 surface smooth under Impetigo.
 Bullous eruption rare in adult common in children.
 Late Syphilides not so contagious. Squamous. Tubercles. & Gummas.
 Squamous Syphilide. resembles Pityriasis both general.
 Pityriasis most extensive on Extremities. rashes face -
 Syph at first pap. & become scaly. attacks Palms & soles -

Infantile Syph. born healthy. few days. like
bad cold. hoarse. nose runs. loses appetite. looks
old. Eruption of Buttocks erythema - Live color.
Vesicles on palms etc. Prog: Good. Treat: early
Mercury - late. K.I. Have teeth cleaned. Protonid $\frac{1}{6}$ gr.

Mar. 19. 07. K.I. 5 grs. to begin.

VII Neuroses: no eruption but functional derangement
of nervous system.

Pruritus: no lesions. may be general or local.

... 2ximalis winter itching in fall. general.
+ at night mostly. May have Senile form.

Local form anus & genitalia. Haemorrhoids. fistula
thread worms. fissure. ulcer.

VIII. Diseases of Appendages Hair, nails, glands.

Superfluous Hairs. acne. alopecia, Change in color of
Prickly heat. Sweat too much too little. Sebaceous Glands

Mar. 26. 07 Soft downy hair cannot be removed. Destroy follicle
of Hair by electrolysis. bath parts in hot water & use Cold Cr.
use negative pole in hair. Platinum needle. Depilatory. x-ray.
alopecia baldness. Congenital. Senile. Premature.
52% Premature are due to Seborrhea of scalp.

Tinea. Syphilis. fevers. Ringworms.

April 2. 07. Alopecia: Tr. of Cong. unsatisfactorily.
Don't have hair cut in women.

Stimulating applications. Liquid best form.

Resorcin. 2 drams & 43 each alc. & water.

apply with sponge. turns gray hair yellow.

every night for clear skin. then once a wk.

alopecia areata. in areas bunches fall out.

Systemic & Parasitic form. Syphilis vulgaris.

Inflam. around H follicle. Perifolliculitis.

nonparasitic. Pustule & papule. upper lip

mostly. Treatment: shave daily or not at all &

make applications soothing

Apr. 7. 07. Barba's itch Syphilis ^{parasytic} folliculitis differs from
Syphilis vulgaris or non-parasitic. Differentiated
from eczema by area being all red in eczema.

Prognosis good. Treatment is tedious shave every day or not at all.

Diseases of the Sebaceous glands.

Seborrhea is most common. functional not an inflammatory.

Seborrhea { sicca or dry, pituitaria capitis
 { oleosa or oily

Oleosa is probably only one existing at present is most common on head & breast.

Milium an affect of sebaceous gland a sebaceous ^{white papules} plug or ~~keratin~~ these never had a peripheral opening. Very common around eyes & face.

Comedones or black heads

Acne is a most frequent disease of the skin Acne is a simple inflammation of the sebaceous glands caused by Bacillus Acne.

Treatment - Both local & general

Locally use germicides. General according to existing condition. Must treat from 6 to 12 yrs.

12 Blank Leaves Not Scanned

Medicine — Prof. Crandall. —

Malaria
Fever.

Malaria Fever — Ague — Chills.

In infectious diseases due to *Parasitism*
Malaria is caused by the *Mosquito*
propagating being the only known
medium of transmission.

Characteristics are attacks of fever & pain
fever may be remittent or intermittent.

Malaria is found in all Tropical,
semitropical & temperate regions.

Southern Europe, India, S. Africa,
S. U.S., Cent. U., N. U.S., West of
S. America.

Remittent all year in Tropical countries
abundant in some seasons.

Not abundant in Summer; Fall,
Sept. - Oct. - Nov.

Mosquito is more abundant in fall
a single female in a generation increase
to 200,000,000.

The intermediate cycle of the organism
takes place in the *mosquito* which
while the active cycle in *Mosquito*.

Three types of Malaria Fever, quartan,
tertian & quotidian.

1 2 3 4 5 6

+ - + - + - Tertian

+ - + - + - } Double tertian.

- + - + - +

+ - - + - - Quartan.

+ - - + - -

- + - - + - } Tertian quartan.

- - + - - +

Pathology of Malaria.

Organisms develop in the blood R, B, C,
which when invaded are destroyed &
produce a proportionate anemia.

On sporulating & Maturing of organisms takes place Proximal section.

Maturing of group of organisms a few hours. In severe cases the organisms invade the tissue cells mainly the Endothelial cells of the capillaries.

Deposits of Pigment in the Liver & Spleen. The destruction of cells may be great producing rapid anaemia depending on the number of organisms invading & the susceptibility of the individual.

Spleen & Liver become enlarged.

Complications are: Hepatitis, Splenic Pneumonia, Nephritis, Abscesses of various organs or Gastrointestinal Disease.

Ch. 18.

Clinical forms of Malaria.

Common, Intermittent { tertian (common)
quartan (rare)

Inoculation period is from 36 hrs. to 2 weeks. Experimentally.

On the individual it depends on the intensity of inoculation & susceptibility of patient. A patient may become immune. Period of quartan is greater than tertian.

Prodroma Symptoms 1 or 2 - not of much consequence as a rule.

When Prodroma occur headache, tired legs, some disturbance of appetite & constipation are common symptoms.

Paroxysmal Disease Description of Cold, hot & sweating stage.

Temperature begins to rise before chill. Chill develops arising from chilly sensations or distress. Skin is blue Muscles & vomiting. Headache quite small, increase of temperature increased. Chill lasts from 10 min to an hour & as chill subsides we have

we have flushes of heat till hot stage
appears & temp. is from 103 to 106
a full bounding pulse, throbbing headache
frequently delirium, some vomiting
occasionally convulsions especially in children
Hot stage lasts from 6 to 8 hrs.

in this subsides the patient becomes apyrexia
as temp. declines other symptoms
disappear & patient goes to sleep,
& afterward feel relieved but weakened.

(Picking of Bones is a common symptom)
Patients feel comfortable between paroxysms
appetite is fair

After few paroxysms Prothymia or a
Chromotogenous jaundice may occur.
Super development of liver & sometimes
we have a little Bronchitis.

There is frequently an anticipation or
retardation of the Paroxysm coming
earlier or later on ^{due} same day

If anticipated Malaria is becoming
more intense, retarded less intense.

Many patients recover spontaneously
& majority would if not treated

Some run a chronic course & these patients
develop Malaria Cachexia.

Tertian or Quartan may show trouble
infection & we may have two hills
in a day

Irregular Types of Malaria
Active Cutaneous may be a distinct
type or merely another type of tertian

1 2 3 4 5

Presence of Parasites in this form in
the blood is characteristic & Paroxysms
are not so noticeable

Patient looks sicker & of a more cachectic appearance & resemble a typhoid condition & half we called typhoid & treated so. This form does not respond so readily to treatment.

Severe Malaria usually a form of Active Autumnal & is a severe type. In susceptible persons this may develop in a short time & we have Congestive Chills of which no more than two is endured.

Comatose forms affect the Brain & Meninges & the capillaries are extensively invaded by organisms. Character: High Temp., Delirium, Coma.

Algid Type. Temp. is low & very low. Subnormal, feeble pulse, some things & reaction. Organisms invade capillaries of Gastro-intestinal tract. Pain in Stomach etc.

Haemorrhagic Form (Black Form).
Dashed below from their history
"Of this the least".

Macrogametes may be moderate or none. It occurs most frequently in the tropics also in temperate.

Constipation, Kidneys not active high colored urine frequently some Stomach & Intestinal Disturbance latter not distressive. Generalized Pains may or not be in attacks. Mental symptoms may be in & sometimes symptoms of Paresis.

Pneumonia contracta & *Septicæ* quite common. Herpes.

Duration: May terminate without treatment or may persist indefinitely a fact of persistence is repeated attacks of inoculation. Some have little or no treatment.

Children are more susceptible having only inherited immunity while adults have also the acquired.

Prognosis very favorable if treated early. Chronic not so favorable because of secondary symptoms: Some cases of tonsillitis, enlarged glands, spleen, etc.

More fatal in children than they respond more readily to treatment.

Races alike are equal.

Long residence in *Spilarea* Country establishes immunity.

Treatment: Calomel in small doses in Pysimany total 1 to 2 grs.

Gummi *Spilarea* & *Spilarea* are until severe anachronism develop then less frequently. Give total of 40 & 50 grs in 24 hrs. or 30 to 60 of the *Spilarea*.

This for 2 or 3 days. Has best results. The best test of response when they are given in the second.

Some recommend a dose of 10 to 15 grs just before procyon.

To relieve anachronism: Bromide of Potash as much as of gummi 3 times a day. Hydro Bromide of Gummi is recommended, if stomach won't retain give hypodermically as gummi *Urea* Muriate. Admixture Bisulphate 15 grs Hypodermic 26 x day.

Dry up well under skin to prevent
a bad sore.

Q. Quinine cannot be taken at all on
account of Nervousness give.

Methyl line (Blue) gr. 3

Mucks (The Pure)

Pulv. Nutmeg gr. 2

give every 4 hrs.

Does not drop or vomit. & large
doses produce toxic symptoms.

For Chronic Malaria give Quinine.

is good in severe Secondary Malaria.

R. To be given if the Malaria is getting better.

Tr. Mus. Linnæa 3 iii

Essentia de Calamagrostis 3 viii

Put these in a bottle & give 11 times a day.
This does not encephalitis & in time
will check without quinine.

To prevent return while Quinine is
exposed give about 15 grs. 2 or 3
a week in 3 doses.

Watch Bowels always thro.

Don't starve thing.

Treatment. Colic. Taxis where patient
is delirious & unconscious

Use quinine hypodermatically from
15 to 30 grs. every 2 or 3 hrs. giving a daily
quantity of 60 to 100 grs. till relief

Coma disappears in about 4 hrs.

& then use quinine by mouth.

Also give sub normal temperature.

Give full doses Hypo. or mouth. 100

Stimulants brandy or Styracina & hot
applications.

Protection against Malaria - little done here.

1. To prevent Malaria

Protect inhabitants against Mosquitoes.

2. Use means to destroy Mosquitoes.

3. Use immune when exposed.

1. Screening houses & various applications
to keep mosquitoes from biting

B.

Cl. Citronelle

Good Alcohol 60 = parts.

Apply to exposed surfaces & walls.

Smoking apartments before sleeping.

2. Preventing development of oil on
water keeps them from breeding.

☞ Mosquitoes.

DRAINING Country; avoid standing
water.

Typhoid
Fever.

An infectious disease caused by
Typhoid bacillus characterized by
ulcerations & inflammation of Intestinal
Lymphatics. Changes in Permeable
organs. Typhoid B. related to Colon B.

History first reported in 1821 Lewis - Paris.

Ecology found in all Temperate Climate & warmer
climates.

Presence of disease in a community
is an index to Sanitary procedure
London free from Typhoid.

It is dependent on Cleanliness of sewage

& Caring for same likewise from veg.

Overcrowding reduces Vitality

Presence of flies

80% of continued cases are Typhoid
in Country as much as City.

Spanish War has had Typhoid

1380 of 28,000 died. Inf. Rus. few died
English in Boer War lost over 8000.
Typhoid Bacillus, *Salmonella typhi* & *S. dysenteriae*.

Variable in appearance

Cultures are killed in 10 min when raised to 60°C .
may live for 18 wks. at 5°C below 0° . Killed in
few hours by sun's rays & are found in all
sections of infected patient & have been found
in milk, butter & in soil. Many infections
take place after a rain following a long
dry spell. No drainage is apt to take place
toward wells. A contaminated well is never
safe. Types of Typhoid fever.

1. Ordinary form usual intestinal symptoms
well marked.
2. Ordinary form with slight intestinal symptoms.
3. Infection without detectable lesion.
4. Mild infection.
5. Duodenal.

Pathology of Typhoid.

Catarrhal condition of small & large intestines.

Involvement of lymphoid structure.

Hypoplasia of lymph tissue of Peyer's Patches.

Resenteric glands which may result in
resolution or necrosis.

Necrosis is followed by ulceration & healing.
If deaths are from perforation & from hemorrhage.
Resenteric glands inflamed but resolution
occurs more often than ulceration.

Occasionally there is break down & form local abscess.
This abscess may become pyaemic & may
result in necrosis & break out on surface as a
flesh enlarged & sometimes infect occur in
bone marrow. Liver & kidney undergo certain amount
of granular degeneration & liver may be fatty.

Resolution usually results.

Respiratory congestion & result in

Rheumatism or inflammation - ulceration of
Larynx & Pharynx

In Dislocated Pelvis it kept in one position
is a tendency to hyperstatic position.

Cr. System: All structures of the heart may
be involved in granular degeneration &
muscular structure especially may have
Engl. Endo & Pericarditis.

Acute Endocarditis not common.

Inflammation of Intestine - Typhoid Complic.

Urinary System: acute suppurative changes.

Neuropathic and Psychical cases may be involved.

Granular degeneration of Skeletal muscles.

Red Swollen may be met with in inflammation.

may give symptoms - general & local.

Sometimes have local infections & result
in Abscess of muscles. Sy-tis rare.

Nov. 6, '95.

First Week

Kerserling Sol.: to preserve tissue.

Symptomatology of Typhoid.

Prodromal symptoms lasting 4 to 14 days.

Headache, Backache, Malaise, Anorexia, Epistaxis.

Chills sensations - or chills - with some

afternoon temperature, diarrhea or constipation.

Tenderness - gutting in R. Iliac region.

Headache & general coming in latter part

of day - Backache some extend to the neck.

Malaise is Universal.

Anorexia is the rule. Epistaxis is common

may at times occur throughout course of disease

sometimes throat become suppurating - purpura

of nose. Tendency to chills in all cases.

Begin with Distinct chills in some cases.

Temperature begins to rise at bedtime & is

at end may reach 102° C.

Disturbance of Bowels always exist & is

associated in R. Iliac Region.

Prothoma ~~periods~~ ends when patient takes to bed
is arbitrary.

Prothoma symptoms continue as before & continue
in headaching. Temperature continues to rise
during first week. Tongue ~~is~~ in ~~the~~ ~~mouth~~
tongue coated in center margins may be
fairly clear. *Prothoma* coated all over.

Complication becomes rather - tending
serious symptoms invariable. Delirium
at night. Throat end of first week often
is enlarged. Rose spots appear on upper
abdomen & lower back. occasionally appear
on trunk & extremities usually ~~in~~ ~~the~~ ~~area~~
more numerous. Temperature pressure
not elevated. Continue to recover for about
10 days. At time of low ~~fever~~ we obtain
viral reaction, may be early & more constant.
These occur less frequently in children than adults.
No. of Rose spots indicates lesions in
Blood & Bronchitis more or less at end
of first week.

Nov. 8.05

Second Week

Second Week same symptoms as first week
Temperature some higher. serious symptoms
& Delirium ^{more} tendency to Bronchitis. patient
becoming more exhausted, tongue dry.

Nov. 10.05

Third Week

Rosula

Fourth Week

During this week we say low ~~any~~ complication
About same as second week patient becoming
more exhausted. Throat end Temperature
increases ~~even~~ & some greater tendency to
complications. Pulse may reach 100-110.
During forth should begin ~~receding~~ ~~tub~~
gradual return tongue clearing. ~~then~~ ~~absolute~~
delirium disappear & steady improvement
condition. ~~Receding~~ ~~tub~~ ~~receding~~ ~~tub~~ ~~receding~~ ~~tub~~
to constitution. Convalescence may begin in
a few days or may be delayed for weeks.

Complications: 1. Heart marked cardiac weakness dependent on average height of temperature. 2. Often have Diarrhoea. 3. A pulse above 100 should be watched carefully.

Again 4. throat 5. Mucous membrane of conjunctiva often dry & red.

Discharge of urine during 2 week period most common in 24 hours. Large amount of urine in stool. Haemorrhage occurs in joints & pericardium & a degree of Myocarditis causes pericarditis. Symptoms of Haem. Sudden fall in temp. & rise in pulse rate. Severe headache pulse 100 - 120. Skin normal. Patient becomes pale & some of the larger ones after first 2 weeks start. Haemorrhage occurs usually singly & may be succession of Haem. May occur every day or so. are rarely fatal.

Suppuration more common in severe cases. Typhoid. Complaint of sharp pain in R. Iliac Reg. Temp. falls pulse increases & is followed by hemorrhage from bowels & followed by symptoms of general Peritonitis. Post Typhoid Complication. Various symptoms of Typhoid. Unmistakable condition. Serial fatal. Very is. Post Typhoid. - usually Phlebitis of lower extremities rarely fatal. no protracted convalescence.

Inflammatory trouble of gall bladder resulting in adhesion & hard which was observed later. Rare.

Hepatitis not serious. most patients level of albuminuria, lasting till end of conv. course & good recovery.

Essential
fever.

Idiopathic fever - Cannot find cause -

Nov. 13, '08.

Treatment
by Food

When suspected put to Bed - absolute rest.
insist on using hot pan - or difficulty
give Cathartic. give plenty of water to drink & so
that they take it up in 24 hr. not recede.

Diet

Cathartic: Colonic Disturbances in large doses total of
2 or 3 grs. all at once or small doses at intervals.

Oil may be used on surface but not effective.

During course of disease Casanova tablet - morning
- sometimes oil - Calomel.

On catarrh in gut to move bowels give evening.

↳ Except in Hemorrhage. 12 or 14 grs. Cathartic.

soft - 11 - 12.

Diet

Absolutely no solid food, or that which can
become solid in bowels. - no milk or anything

objection to milk. - have to take 4 or 5 ounces.

Casino forms hard stools. irritating to bowels when
digestion is low.

Broth. + white of egg have both cool not to cook stale egg.

Run egg digest in 130° water once or twice.

Strain broth after adding egg. Broth may be
seasoned. salt & pepper. 1/2 cup.

Egg strainer - white of egg in water strained -
add a little orange juice.

Every two to 3 hrs. when awake give Diet.

Total quantity 36 grs. of food in 24 hrs. (Broth).

Diet of Convalescence. When things have become

normal in 2 or 3 days begin giving thin gruel.

Boiled rice in Broth - continue Egg.

After a week normal use peptonized milk

or small portions of milk & water & Eggs.

Soft Baked egg, toast etc. Chew Baked Meat.

Abundant water throughout favors elimination

of toxins thru bowels, kidneys & skin.

Black Coffee or clear tea in morning.

juice against overeating.

Nov. 21, 03.

Medicinal Almost impossible to give medicine to reach
 Bowel - produce effects.
 external antiseptics not very satisfactory.
 Best effect on Bowel act thru their absorption
 into circulation.

Salol some forms of Salicylic acid.

Carbolic Acid & Camphor combined.

Salicylate of Soda 10 gr. every 2 or 3 hrs.

Salol 5 grs. every 3 hrs.

Salol treatment may give Carbolic A. Poison
 effects on Kid indicated by uric acid.

Salicylate may be given for long time in
 full doses with a little persistent effect
 on circulation. It is a little better than Salol.

Irritating effect on Stomach is due to acid
 & Stomach splits up & liberates acetylsalicylic acid.
 This may be overcome by giving with it
 an alkali: Bicarbonate of Soda, Seltzer Water
 & abundant water to glass each dose.

Syrup of Choclate to disguise taste. - irritating
 Plenty of Water lessens liability of effect
 on Kidney by keeping Kidney flushed.

R. Sod. Bicarb. ʒi
 Sod. Salicyl ʒii - (much better Part)
 (Natural)

Mf. in Proden. 12.

Sig. 1 every 3 hrs.

Do not stop Salicylate for Albumin in Urine.
 It may not materially shorten Disease
 but it runs a milder course.

Temperature To reduce temperature Cold Water.

Cold sponge b. this - & tub baths.

Start with cool - add till Ice Cold. sponge
 spine especially. will reduce temperature
 from 101 to 99 in half hour or so.

Wrap ice in towel & rub towel. spine.
 Use when fever is 103° - & also tub baths.

Do not reduce temperature below 100°.

May continue to drop after Bath, & produce Collapse.
Rectal temperature 1° higher.

Nov. 22 '05

Cold Pack in connection with Bath.

Cover Cold chest with flannel blanket.

Change sheet every 2 or 3 min. till time reduced.

Turning after putting on sheet.

Injection of cold water 2 or 3 pts.

Phenacetic acid depressing power with Caffeine
may be used in early stages. First week.

10 gr. Phenacetic & 3 gr. Caffeine Cit.

2 to 1/2 oz. of 5% solution of morphine in 0.2

gr. of Salicylic

application, flayed 10 drops painted

over abdomen & cautiously cover with

oil silk.

Application of 2 to 3 feet. when necessary.

Alcohol sponge in groin.

Keep mouth clean & clean with 2% solution of

Gargle of Chlorate-Potash.

Glycerine & Carbolic Balm used in Clanny M.

Bedatives indicated especially at Night.

Trional or Bromide, Baral.

R Trional gr. xii

One at bedtime.

R Pot. permanganate gr. xii either in 9 or 12

Chlorohydrate gr. x

at bedtime.

Do not wake patient except when stimulant
is required.

Since 11.

Whisky or Brandy small glass on beginning

of an hour. may 2 or 3 drs to start & increase

Aromatic ammonia is good & refreshing

in glass of water is quick stimulant.

Strichnia for heart stimulant 40 gr. every 6 hrs

to begin & increase as necessary till they take very small

By mouth or hypodermically.

Weak heart in latter stage Digitalis may be used.

Castor Oil has less action on Stomach.

Digitalis $\text{C}_{60}\text{H}_{100}\text{O}_{16}$ Hypodermically

Large saline enemas

Extreme cases use Normal Saline Solution ^{1.75%}
Hypodermically using from 3 to 500 c.c.
Daily.

Bed Sore Keep parts rubbed well with Alcohol - Alum 11.
Change position. Lessens possibility of Hypertatic
Congestion? Thromb.

Retention Give Water. Use soft Catheter can
be told by percussion.

Diuretic is good Potas. Citrate 10 to 15 gr.

Eps. Nitrate Dils. 30 drops

If tongue is coated Dilute Mucic Acid
give 4 or 5 times a day 15 drops well diluted.

Don't give with Salicylate Powder.

Complications Pneumonia treated as Pneumonia above
Hemorrhage keep quiet stop all food by mouth.
may use a little Morphine for Hypert.
If Profuse use Saline Hypert 500 to 1000 c.c.
raise foot? Bed. use additional Erythrae
but use as a last resort. See R. D. H. R. R. R.
Don't give food till 24 hrs but increase
Orally or I.V.

Don't use enemas

Good Laxative Castor Oil.

Perforation give Opium at once.

Place patient on R Side Continuously all
Leaves surgical assistance give nothing
by mouth. Use Erythrae Hypert.

See also from Operation

Ulcers 1. Solutions required are Sulphate ^{1.75%} 10 grm. 100 c.c.
Diarrhoea Water 1/2 to 1000 (Permanent).
6 1/2% Na Nitrate in Dist Water.

Typhus Jail or Ship fever, Spotted fever
Fever. An acute infectious Disease Char by
 high temp associated with skin & B. von
 symptoms
 Etiology Specific Virus not known
 causation of people in unsanitary surroundings
 in Jail.

A rare Disease in this country. & not common
 1893 few cases in N. H. & S. East in Baltimore
 Very contagious Disease when numerous cases.
 Described as a plague in past few centuries.
 Isolated case not so contagious.

Nurses are attacked.
Pathology Changes incident to high temperature
 mainly Brachy pneumonia. Degeneration &
 Muscular tissue

Symptoms Incubation 12 day. Onset in
 of chills usually distinct. Rapid
 Rising temperature soon reaches 104
 & continues day & night. Typhoid Expression.

Some Bronchitis. Disturbance of Stomach.
 Eruption appears in 3 to 5 days.

Chest & Shoulders, usually maculopapular.

Prostration Extreme. Rapid Pulse.

Disease lasts from 2 to 3 weeks.

Kidney often albuminuria occasionally
 Hemorrhagic spots.

Treatment Early administration. Essentially same
 as Typhoid fever.

Prognosis Fever may be high as 105 or low as 98.

1 Part of B. solution diluted 1:50 with a.
 of this mixture mix equal part of urine in 10% alcohol.
 1 cc ammonia run down side of tube. ring where
 + is Bright red & shake foam is light pink.
 + whole solution is red. Positive in over 80%
 get in first week. (Miliary TB. gives same Reaction & Pos.
 in Reaction stage.)

Relapsing
fever

A fever intermittent in character caused
by *Babesia* (Babesia) temperature
for 6 days then 6 days intermission
Mode of infection not known, Mosquito or Bed Bug
like history, B. is unknown.
Incubation is 5 to 7 days, onset like Malaria.
Pain & Aching of Limbs, sometimes sweats
follow remissions
Organisms during height of Paroxysm
& may be abundant.
Enlarged Spleen, more or less anorexia
Constipation, some Delirium at height, fever
May be several periods of fever intermissions with
Tendency to loose Diuresis.

Treatment

No specific, Quinine has no effect.
Treatment resembling Typhoid, Sponging,
light Diet during fever.
Prevalent throughout Tropics & Southern States.

Prognosis

Rarely fatal.

Dendue

Known Tropical & Sub trop Climate characterizes
by Paroxysms of fever pains of joints & muscles
& a polymorphous eruption.

resembles exanthema very contagious disease unknown
Prevailed thru trop & Sub trop common in
Southern States Epidemic 1877, 30000 cases
in 2 months in Galveston

Symptoms

Incubation 3 to 5 days no Prodrome or symptoms
onset sudden, headache, chills, aching in
joints more severe than any other disease
temperature rises to 105° & 7. Head symptoms
of an acute fever. Some joints may become
red & swollen as in Rheumatic fever.

Hemorrhage from Mucous Membrane
in severe cases. after 3 or 4 days of fever
there is usually a remission or intermission
patient feels sorely for day or two

followed by 2-3 days of fever resembling
List after which pat. improves & patient
is sore & stiff for week or so.

Eruption may occur at any time during disease
& is not uniform in character may last
for some weeks.

Differential. Acute Rheum., Yellow fever,
& Malaria. frequently called Rheumatism
at beginning

Treatment. No Specifics? Quinine & Salicylate. Soda
use of cold sponging for temperature
Rarely fatal.

Cerebro
Spinal
Fever. Called an infection caused by organism
Diplococcus intraneurialis *Meningitis*
found in leucocytes & pur cells.

probably same disease as found in cattle.
Infects Cerebro Spinal Meninges probably
into the nose.

Orchitis & Catarrh frequently precede disease.
usually 1 or 2 each occur in a family.
Occurs in epidemics with tendency to
sporadic cases in (less of course), probably
moderately infectious. Occurs in country
& city, more in winter & spring.
Most frequently in young children.

75 cases in under 2 yrs of age.
1000 deaths in N.Y. last year. more deaths
than any disease.

Young Soldiers in Camp have suffered
single attack does not afford immunity.

Pathology. *Meningitis* involving *Brain* as *Meningitis*.
& *Dorso* & *Lumbar* Spine. a *Fibrine* *Pleuro*
Exudate. Cranial nerves 2, 5, 7, 8, are involved

Symptoms. Onset sudden. Chill. Headache become persistent
usually moderate fever may be high.
great Depression & Delirium, pulse feeble
& slow for febrile condition. *Temperature* low as 30.6 or 70

Very early Rash appears about Shoulders
 taken Eruptions in first day or two.
 has for this season been called spotted fever.
 May be delirium or profound stupor.
 Removal of muscles with tonic & Clonic spasms
 may exist. Kernig sign consists of inability
 to keep ^{leg} knee straight with flexion of thigh



Babinski Sign lifting foot there is tendency
 to extension instead of flexion, also tendency
 to spread of toes.

Whenever Babinski Sign is present something
 organic wrong with brain usually.
 Paralysis of Ocular Muscles appears.
 Sensitiveness along spine with more or
 less hyperaesthesia.

Herpes about Mouth common as in Pneumonia.
 My perleucocytes 25 to 50,000

Constipation is Rule & some retraction of Abdomen
 Vomiting common. Urine may contain Albumin
 sometimes Blood & occasionally Sugar.

Irritation of floor of mouth produces dysphagia.
 Death occurs in 5 to 10 days cases may
 show remission in symptoms & may become
 chronic. Complications: Pleurisy Pneumonia
 Peritonitis.

Other results: Persistent headache & recurring
 Hydrocephalus a large to show pericarditis
 & some cranial lesions. Blindness may occur.

Prognosis: The mortality rate is 25 to 75% & large to that
 varies show prognosis of some cases is more.

Complications: Inflammatory condition of Labyrinth
 Klebs says mucous lining of ear is viable in
 vestibule & semicircular Canals.
 Liquid Diet

Treatment

Isolation of Patient, quiet, Laxatives & Diuretics
to assist in elimination.

Urethral rec bag & ice caps. Stimulants.
Sedative Bromide & Chloral. or separate.
Severe Headache: opiate. (Bromide & Chloral)
Salicylate of Soda full doses. (Per Rectum)

Lumbar Puncture introduce needle in
Spinal Canal & withdraw fluid. on line
or level of Crest. 2 1/2 Cms. Child 4 to 6 in adult,
Platinum needle. Valuable as means
of Diag. Pus cells contain Diplococci
4 to 12 at a time. (Bromide relieves vomiting)
Antiepileptic fluids have been introduced

Erysipelas

acute contagious infectious disease of the
Skin caused by some variety of Streptococci
Pyogenes. May gain entrance thro' abrasion
& in some cases starts without apparent "
especially about face. Most frequent site,
frequent in Spring & Fall. Chronic Alcoholism
Bright Disease & Debility from any cause
are predisposing factors.

Purpura & Unhealed Naval in infants
are favorable conditions. Should not
attend confinement with Erysipelas.

Pathology

Simple inflammation rarely septic
may have a Peri or Endocarditis.

Incubation from 3 to 7 days. invasion

distinct Rigor rapid rise of Temp. & a

Typhoid state develops disturbance of St. & Bowels

One spot itching, burning, shining, swollen
appears usually about face & skin thickened
distinct line of demarcation. feels like ridge
gradually progresses, original site clearing up
in 3 or 4 days as disease is progressing to

other areas. It may form continuous serious or
semicircular fluid & whole face may be

involved in 4 or 5 days manifesting marked swelling
& any part of the body may become involved.

May last for several days 5 to 10 days during most of this time Temp is 103 - 5 with little Remission. May have Delirium some prostration. If scalp is invaded extensively may have a Meningitic complicating. Pneumonia & Cardiac infection are complications. tendency to migration of inflammation in Migrating cases original site may be healed while other is continuing. one attack does not protect Indolent but rather Predisposed

Dec. 11

Isolate.

To. Cl of Iodine & Gummie ^{full dose.} $\frac{1}{2}$ teaspoonful 2 or 4 hrs with water.
5 grs Guai. Mur. " with above.

Iodothol painted on or. Is. Colloidion.

Injection of antiseptics along margin
2% Carbolic Acid at little ahead of Disease.

Cold cloths local application.

Cold relieves congestion & second inhibit growth of Mass. Org.
If abscess form should be opened as elsewhere.

Old or feeble stimulants are indicated.

Prognosis favorable for fatality.

Thick complications.

Iodine blisters.

Septicemia
Pyemia

Infection a morbid process induced by invasion & growth in body of Path. organism.
Local - abscess.

General - anthrax

Intoxication a morbid condition caused by absorption of toxins in large part derived from Path. organisms.

Microbians
Protozoans
Toxin.

Septic Intox is sometimes call Sepsis
Agents of Infection are living organisms.
These " Intox are Chemical.

Types of Infection.

1. Local with production & absorption into the system of toxins
Sept. Intox.

2. Septicemia general invasion of body tissues by organisms of suppuration without metabolic foci of suppuration.

first type may change to second as gonorrhea.

Erysipheles

Symptoms: Chills, fever, & sweats, irregular in intervals & intensity; Pulse small & rapid. Gastro-intestinal disturbance, Tongue coated. Coated in center & red at margins - not diffuse - mental reputation resembles Typhoid. Delirium may be present more char. of Staphylococcus Infection.

Sept. Infection may show clear Mentality to end.

Gen. Sep. usually follows an acute infection or some acute or Chronic disease may not always be able to locate point of entrance of organisms.

3. Septo-Pyemia - form of gen. Infection where we have ^{local} metastatic abscesses due to septic masses. *Embolii*

Feb. 18, 06.

External wounds of skin & subcutaneous may have secondary foci in the bones or in the lungs.

Suppuration along intestine tract may give secondary involvement of liver.

Endo Endocardial affections of heart may result from infections of any part of the body.

Infection about face, nose, ears may result in secondary infections of the Meninges.

Treatment of General infection

Elimination by bowels & kidneys.

Supportive treatment to easily digestible diet & stimulants if necessary.

Medicine; Salol, Salicylic Acid Compd.

Merck prep. Gricin has general antiseptic effect thru Cir. 5 gr. & 100.

act as laxative less frequent

Rheumatism
Acute

Infection:

Salicylates, 10 grs. very a lot will dilute
Local application, moist pack, cold pack, alcohol.
Strepto. Antitoxin not accomplished much.
but does no harm.

→ Rheumatic fever: an infectious fever
but not contagious.

Etiology. Organism unknown believed
to be cause.

Predisposing or an associated condition
Tonsillitis.

Exposure is a cause, cold: etc.

- occurs in early adult life chiefly

One attack does not prevent subsequent ones.

Path.

Hyperemia & swelling of synovial
membranes, lig, tendons, & sheaths.
rarely resulting in suppuration.

In this condition there is excess of fibrin
in blood & leucocytosis of Widal's
degree 10 to 12000.

Symptoms.

Onset sudden. Pain in one or 2 joints
occurs during night, slight fever
Malaise. Temp. 102.5 F; rapid pulse 100.
Tongue coated, purpuration (red sore throat).
Joints painful, red & swollen.

Smaller joints most involved.
occasionally larger joints and all joints
urine - acid, high spec. g. high color, waste
increased, Chloster diminished. Albumin
present in small amounts.

Tendency of disease to migrate from
joints in beginning course repeated
over several days & several weeks
give indefinite prog. as to duration.

Prognosis.

Good.
Few die from Rheu. itself but complications
less than Typhoid 20%.

Dec. 20, '05. Complications: most important
 inflammatory conditions of heart from strain
 with or some cases. Evidence: by distress
 in respiration, heart modifications of the sounds.
 possible disturbances of Rhythm & murmurs.
 Keep quiet for heart trouble. Pneumonia
 & Pleurisy hyperpyrexia rare. Skin eruptions
 a form of Erythema, occasionally spots.
 Subcutaneous hemorrhages of bearings,
 Bruised spots.

Treatment Put to bed in flannel blanket
 Diet. milk, gruels & plenty of water.
 Lemonade for acids. Gargle Broths & Soups
 for joints to prevent irritation.
 Local application: Methyl Salicylate
 Lead Liniment wash. Use more opium than
 in other. Keep all joints wrapped.
 Internally. Salicylate Preparations full doses.
 Aspirin, Salicin or Salts. Oil of Wintergreen.
 Potassium Bicarbonate $\frac{1}{2}$ dram every 3 hrs
 till urine is thoroughly alkaline.
 K. Acetate for kidneys
 Add salts to diet. Later R. I. moderate
 doses. For hyperpyrexia use Cold.
 Keep patient quiet.
 Seldom have more than one attack.

~~Arthritis~~
~~Fever~~
 Gonorrheal
 Rheum. Etiology. gonorrheal infection which becomes
 constitutional by absorption. Virus
 may occur at any time during attack.
 Early symptoms are Rheumatic pains in
 knees or Ankles, Elbows, or wrists.
 Initial symptoms not so severe. Temp. 100-101.
 Joints swollen & red & gonococci have been found
 in the serous fluid about joint. Continued
 to be about. this may become severe. Quite a
 marked anemia. same as in Rheumatic
 fever. Loss in weight. Disturbed appetite

Constipation. Prognosis: Good as regards recovery. Doubtful as regards immediate recovery. May last for weeks & months. Protracted disease. Suppuration of joints very rare. Ankylosis partial or complete is quite common.

Treatment

Systemic absorption from local infection reduce the local infection. Medicines have very little effect as before. Salicylate of Bismuth. Some form of Mercury small doses. Iodo-hydrated starch pill.

I. O. 0.0. 1. 4. 4. Regulate Bowels & an Iron tonic works well. Throughout I. O. 0. 0. for pain: Phenacetin 10 gr. Phenacetine 10 gr. with 5 gr. Caffein Citrate. Use little Morphine. In severe cases joints may have to be seen. Subsequent stiffness of joint. Anesthetics & break up adhesion done now & times will release. Walk till all acute inflammation has disappeared. Do as well at home as at clinics. Give plenty of Water. Best possible care. Local Applications same as in acute. Tropical & Subtropical manifested by febrile cold, jaundice & tenderness.

Yellow Fever

Jan. 20

Etology. It is unknown. Means, Communication known. Mosquito. (Stegomyia Fasciata). As Evidence of Mosq. Trans. Inoculation made. One slept, lived with & cared for Yellow fever Cases & no instance where Mosq. has been eliminated has he acquired the disease. Clothing has been worn of sick patients. Experiments were on soldiers. In Contrast with this it is easy to inoculate by allowing Stegomyia to bite Patients after 10 to 15 days to bite healthy individuals. Mosquito came was demonstrated by Dr. Finley 25 yrs ago - 1891. Recognizing Mosq. as means of trans. for

three yrs after cleaning Cuba & Improving Sanitary
Condition there was no ~~the~~ except those
coming from other ports. & Cuba had not
been full for 20 years or more.

Pathology: Degeneration of Parathyroid glands
rare in any fetus. Considerable
in man. In blood suspicious
of K.B. & B. organisms.

Symptoms: Incubation 3 to 4 days,
onset sudden, chilly sensations, pain in
back & limbs, begin usually in evening.
Fever rapidly rises 102.5 - 104.5 may be
more or less. Headache, Thirsting, Cough,
which later symptoms. Constipation.

Flush face, Exsiccated, early signs of
Dysentery.

After 2 to 3 days symptoms abate & in
have a period of remission, usually 2 or 3 days.
When fever does not return symptoms
reappear more or less. Intox. High fever
high, more prostration. Delirium, Thirsting,
Cough, Headache, Black stool. May be fatal
in from 1 to 3 days or may recover by Crisis
Tympanic. Starts with Chills 1.5 to 3.5 &
relates.

Treatment: Symptomatic. Calomel early.
Sponging to reduce temperature. Abundant
Water, Acid drinks, Alk. Soda & Broths no
solid foods. Stimulant. May have to give
Med. Hypodermically.

an. 8. 16 Tetanus infectious disease by T. Bacillus
Char. by tetanic contractions. Etiology
T. Bac. cause usually enters thru punctured
or unclean wound. Colored race more suscept-
ible. An Aerobic Germ making Punctured wound
more susceptible. Path of Tetanus Resembles
Diph. it is local disease producing toxin

which are absorbed & affect nervous System
 Is very powerful toxin
 Symptoms. About 2 or 3 days after wound
 symptoms appear, most definite in location. Usually a stiffness about seat of infection.
 Stiffness of muscles (neck) rigidity of
 uninvolved muscles. (Trismus) Chills, rigor
 may occur. Later involvement of general
 muscular system until condition of opus
 tetanus. Temp. rather high 100.2, 4.5 - 104.0 both.
 Cannot take food condition of hyperaesthesia
 noise for it may produce convulsive attack
 when not in convulsion no pain.
 Diagnosis: Strychnia Poison. we have patient
 relaxed between convulsions not in tetanus.
 Cannot bend head forward in tetanus.
 Tetanus disease rigidity of muscle due to
 auto-intoxication. Extremities develop rigidity.
 accompanies Gastro Intest. Disease.
 In tetanus look for primary lesion.
 Prognosis. 90% of traumatic cases die if not
 treated until signs of tetanus begin about
 50% of idiopathic cases die (when origin
 cannot be detected) If treated in prophylactic
 way the treatment is as satisfactory as in
 Diphtheria.

Treatment. A punctured wound should be treated as
 an open wound which may be done by packing
 with gauze & reach bottom with Pure Carbolic A.
 & pack afterward. Dress every day until period
 of danger is past (8 or 9 days) Use a local dressing
 Camphor Phenol (Camphor & Carbolic Acid equal parts).
 Tetanus Antitoxin if in dangerous wound.
 give one half (10 cc) at time of injury & in body.
 It is advised to use dry tick Antitoxin in the wound
 itself if Disease develops. Keep patient quiet avoid
 excitement. Early use Tet. Antitoxin give 2000 cc

every 3 hrs. for days if necessary. use Puratives.

For Kidney action

Quercia Mixture (S.A. Mathews)

Sod. Chl. 15.00

Sod. Sulph. 12.00

Sod. Citrate. 20.00

Calc. Chl. .05

Aqua Dist. 4000.00

500 C.C. 3 or 4 times a day by mouth or
hypodermatically.

Bromide & Chloral to Control Convulsions

Morphine & Chloroform if necessary.

Never give Strychnia. Avoid Nerve Stimulus
& outside stimulation

Jan. 10.00

Hydrophobia or Rabies. Acute Disease of warm blooded
animals due to some specific unknown Virus
Negri has found bodies in cells of C. Nervous Sys
Amiebold in Character which may be cause
Negri Bodies.

Conveyed to man by inoculation, dogs
wolves & most domestic animals are susceptible.
Bites of Rabid animals or those infected with
Rabies are very dangerous on exposed parts of
the body. Only a minority of those bitten con-
tract the disease. Practically all die if not treated.
Incubation period 2 wks. to 3 months

Symptoms. Premonitory Symptoms some little
Irritation about site of infection & numb-
ness patient becomes anxious & suffers general
hyperaesthesia to all impulses. Larynx becomes
Irritated accompanied by hoarseness. Slight elevation
of temperature. May have difficulty in swallowing
Water stimulates this spasm more than solids.

Excited period. All exaggerated any attempt to take
food produces laryngeal spasm. Rem. 100-110.
Remains thus Excited Stage. This stage lasts
from one to three days

Paralytic stage six to eighteen hrs. condition
of a prey dying of exhaustion.

Diagnosis. Mistake usually made to kill
suspected animal, but preserve, if it is killed.
A small piece of spinal cord of animal inoculated
into a rabbit will produce Rabies in 5 days.
Inoculate under Dura.

Treatment: Send away for treatment. Canterize
wound thoroughly & keep wound open for 5 or 6
weeks. treated by attenuated Virus. Rabbits are used.

Virus Five. highly active. at height of disease
glycerine Extract of some of Cord is made &
kept at ages from 1 to 30 days old. Small guinea
& 50 Day Virus is inoculated & kept up till strong
Virus can be used. Result of this specific there is
very rare a fatal case.

Keep patient in dark room avoid excitement.
Bromide, Morphine, Chloral, & Sedatives
Laxatives, & Diuretic Solution.

To relieve Spasm. Spray throat with Cocaine Solution
or allow patient to swallow a little.

Warn family against injuries from patient.

Jan. 15 '06

Anthrax or Malignant Pustule, Woodcock's Disease.
B. Anthrax cause. gains entrance thro' inoculation
by some abrasion of face or hand among
stock people & handlers of Wool, hides & skin.
implies an infection of animal or hide etc.
Anthrax B. is of moderate virulence Spore is
of great virulence stored for years & Carbolic
& Boiling water.

Symptoms: Mild & Severe. Painless swelling
at site of little abrasion becomes vesicular
& pustular. few rise rapidly for first few days
some may slough or continue to fester through
some involvement of Lym. gland. Lids.
organisms found in blood just before
death. found in liver & spleen.


Edema about face, falling of eyelids, fear.
 May develop anthrax by sucking infected meat.
 Char. by chill, vomiting & diarrhea, white pain
 rose in Temp. - Dyspnea & Coughing.
 usually short duration may recover from
 infection usually after internal
 Mild cases slow recovery. If first few days
 are favorable. Patient is best kept in
 treatment. To save for Contagious
 Infection from swelling is dangerous.
 1870. Large Dose
 Beside local injection. Stimulation & Fresh
 ment. Watch elimination.

glanders is a Tubercular Disease manifests itself by
 formation of tubercles
 Visceral & Superficial or Local. Sup. resembles
 Tubercular Nodule of Skin in horse is
 called Farcy. Etiology due to B. Mallei or Glanders
 short rod. infection obtained usually from horses
 affects Mucous Membrane of Horse usually catarrhal
 condition of nose. Individual contract glanders
 from this secretion. Mucous Membr. of Nose
 of horse & Man are favorable ground. few
 days sufficient for development of acute form.
 Symptoms Beginning resembles Grippe.
 Catarrhal Inflammation of Nose & Throat Pain &
 itching in different parts of body & rise in
 temperature. Acute Glanders may be intense
 & Patient may die in 2 or 3 Days. on other
 hand they develop slowly & exist in a Chronic
 form. Lasting for months Chronic Cases
 are dangerous. Have in Man a Glanders
 pneumonia due to inhaling.
 Superficial obtained thro' abrasions in skin
 Like Lupus is very persistent & difficult to
 eliminate.
 Diagnosis Examine Secretions for organism

or using Toxin Mallein same as use of Tuberculin.

Treatment: No specific. Antitoxin not satisfactory.
Symptomatic treatment. If abscesses use antiseptics irrigation & membranes.
Local abscesses treated as Anthrax by use of Carbolic Acid. Attention to Bowels & Kidneys. Stimulants if necessary.
Main feature is Prophylaxis.

Jan. 22 '06 Actinomycosis chronic infectious disease
Actinomycosis. Tubercular in nature due to Ray fungus streptothrix actinomycis common in cattle acquire it from eating grain or other feed usually found about jaw thought to enter down by teeth may develop same way in man may affect any part of the body. a growth resembling a sarcoma develops from which it cannot be told except by microscopic exam. tissue swelling gradually ultimately breaks down with abscess & suppuration with pus we find coming small granular bodies called Sulfur balls size of seed. In crushing these they are made up of Ray fungus are characteristic of this disease. After suppuration there is some fever & fever in free discharge serious disease. Where infection is local & removable should be removed by Surgeon Pot. Sol. 60 gr. a day. Long some results. Prophylaxis important be careful of infesting hands.

Bubonic Plague. Specific infectious disease due to B. P. Pestis. discovered by Kitasato.  found in diseased tissue & later stages in Blood. in last 5 yrs 300,000 have been killed. has existed in all civilized countries in Cal. & N. Y.

Etiology. A filthy disease due to poor & insanitary land.

Rats, mice, dogs, flies, etc. carry disease. Rats worst.
May be taken to thro' digestive canal prevail
especially during hot season. all classes
Symptoms mild form. Restis minor fasting
for a few days little glandular swelling
slight systemic symptoms.

Diarrhoea, backache, stiffness, soreness gradual
rise in temperature anxiety restlessness with
considerable Depression. Temp 103.7+ in afternoon. Day.
then a remission of temperature & glands which
have begun to swell become sore showing
signs of suppuration with which we have
another rise in temperature. From this on
the symptoms are characteristic of a severe septic
condition. Later symptoms inability to
digest thin food & constipation & diarrhoea.

These Sym. may last a few days with death
or for a few weeks with death or ultimate recovery.
This was Black Plague London 1605-1700.

Complications.

Abundant Gallian & Regional
Pulmonary type lungs are affected.

Gastro Intest. Pneumonia may complicate.
any case. 96% of all cases in which they
seems refuted prophylaxis. our great danger
in handling patients if care is taken.
essential thing is to prevent food or drink
by rats & flies. These various insects.

features. Halphins Lymph. promises most in a
specific may speak from this treatment is symptomatic
Essential or Infectious fever or fever about settled
up from no cause. Febricula Ephimeral.
Lasting a day or two with slight local
infection.

Whitish type of infections become symptoms
of which are not ^{manifest} enough to determine
exact nature.

Gastro Intestinal especially Auto-intoxication
 Deriving others from delaying organic matter
 in other poisonous cases

Treatment: Purely symptomatic withhold or restrict
 diet, attend to Bowel & Kidneys.

Infectious jaundice (Weil's Disease) a jaundice
 appears sometimes as an epidemic type
 with gastro intestinal distaste & fever
 some fever 102-3 jaundice & albuminuria.
 Liver & Spleen are enlarged, conjunctiva & Sclerae
 jaundiced. Anorexia & then a coated tongue
 sick for 1 to 3 weeks symptoms gradually improving
 usually recover. Treatment: Symptomatic.

Restrict diet easily digested.

Glandular Fever. Disease involving Lymphatic Glands
 & Fever. Symptoms usually begin with slight sore throat.

Yellow redness. Malaise swelling of glands
 especially those of Neck & Submaxillary
 Lymphatic. Great may be reached
 resembling swollen glands in lymphatic.
 Tendency to suppuration may also be moderate
 in other superficial glands. In
 fatal cases Vesicles of glands are involved
 lower spleen somewhat enlarged

Thyroid to some extent as complication
 always in the rule

Symptomatic treatment. Cataplasms warm
 neck Pack with Lanolinum if suppuration
 in open glands. Liquid food can only be
 taken

Jan. 29 '06. Disease of Thyroid Animal Extracts used for ages
 Lown Secord, & Bernard *Clinical Life*
 Prolong life. Extracts. Stimulate for weeks
 etc & is reaction & condition is worse than
 before. Chief Ex used Test. & for.

B. S. this work along this line in studying secretion
 with a little.

Thyroid. Pituitary. Adrenal. Thymus. Lymph

Since that time most organs producing secretion have been studied

Paraneurymatous Organs. Para-Thyroid. Test. - Glands.

Internal secretion of Ov. & Test is positive necessary for existence in Normal life -

Reserve all possible when surgery is used.

Thymus value to young children. well developed at Birth. atrophies gradually till 4 yrs.

Pituitary Body. how come with. on cerebral circulation & nutrition of Brain.

Spleen differs in that its function can't be assumed ^{of other} Liver Essential

Parotid, Prostate, Lym. may be removed with out bad results.

Adrenal cannot be removed.

Thyroid Gland has been most studied Tendency to develop goiter.

Removal of Thy + Para-Thy in man is invariably fatal.

If all is removed Symptoms of Myxoedema develop. & continue to fatal result unless Thyroid Ex is given.

It seems that the Iodine Element is most essential part of Int Secretion Combined in mucous substance.

During first 3 months no Iodine is present in gland there is considerable

Iodine in Mother's Milk. In gland

of calf first months Iodine is present

but in Cow's Milk there is little Iodine.

There is often enlargement in Thyroid at time of Menstruation & during Pregnancy.

Usually some enlargement & increase Activity when it does not enlarge there is usually No Dist. All in child & this is that to

have relation of Champania 24/25 with
 no Endang there was All in Champania
 Jan. 31.00 Exp. tests have shown that Thyroid Ex
 increases amount of Oxy absorbed &
 elimination of CO_2 also increases amt. of
 Nitrogen Eliminated especially thro' urine.
 Increases Temperature in normal indiv.
 Gland seems to have some relation
 therefore to Respiratory gaseous change
 of Blood & tissues (Metabolism).
 Some believe that it produces an Antitoxin
 which neutralizes Metabolic toxins! Leuco-ma
Goiter - Struma - described in 13th Century
 by Marco Polo. as a disease in Central
 Asia & certain valleys supplied by water
 from Mountains. prevailed to some extent on
 animals. Paracelsus in 15th C. wrote on
 it as existing in Alps & spoke of its
 relation to Creatinism. Disease occurs
 epidemically & sporadically.
 Epidemics occur in schools, Prisons, Bunko
 community around these centers may be
 unaffected something in locality or
 of Building seems to have bearing on cases.
 Afflicted indiv. when removed often recover
 readily. Rare in Animals here.
 Etiology: unknown. Cochen think it is
 due to water but element therein not
 decided prot. Metab. some think it is
Symptoms: Low grade fever, loss of weight
 cause may be other than inconvenience
 while small cause a great deal.
 usually occurs soon after birth & may
 not be fatal. More common in females.
 have acute & chronic form. Acute is usually
 vascular & Chronic Parenchymatous
 Chronic form may be serous.

Differentiation Simplest form: is a simple hyperemia. coincident with menstruation or stim of sexual organs as pregnancy. Enlarged, rounded, smooth round neck. consistency soft or normal.

Parenchymatous form: glands enlarged somewhat nodular or asymmetrical border sharp or defined. may reach size of a Hen's egg. Consistency: rather soft but outline distinct.

Vascular form: Moderate enlargement spongy consistency. Readily compressed & vascular murmur heard on auscultation.

Colloidal form: Symmetrical enlargement not very large skin usually rather tight & dry.

Veins dilated hyperthyroid symptoms.

Atrophy present. Consistency: rather firm.

Cystic form: Hard, nodular, firm consistency size? Pea to egg size nodules. tendency in some cases to calcification.

accompanied by hyperthyroid symptoms.

Mixed form may partake of any of above forms. It is mixed form - that usually hangs down.

Symptoms incident to simple types.

Unless there is some inc. or diminution in gland secretion there are no constitutional symptoms. May produce local symptoms due to its mechanical relation to adjacent parts & studying resulting symptoms the two classes of symptoms should be considered. Most goiters do not produce symptoms & consequence many do not know they have goitre when it exists even when symptoms can be associated with goitre. Sporadic cases not due to goitre develop at beginning Menstruation.

(Symptoms of goitre not seen. When Isthmus does not exist the goitre does not protrude.

Feb. 5. 06.

as when present, does not rise & fall with Larynx.
 also greater tendency to growth into Thorax.
 Symptoms: Suffocation especially at night pressure in
 upper part of Thorax on smiling the head.
 Evidence of nerve pressure: Recurrent Laryngeal
 " " disturbance of voice, Phrenic.
 Disturbance of Resp. Vagus Dist. Heart.
 some cases Diag. Phthamatic

Dif. Diag. Visible & Palpable tumor in neck in
 region of Thyroid, Symmetrical? & a goitre
 in majority of cases.
 Hodgkins involves lymphatic enlargements
 are irregular & in other locations than thyroid.
 Anemias will show circulatory symptoms.
 change in pulse. usually appear lower down
 - give peculiar sound in murmur but may
 have also in goitre pressing on aorta.
 This occurs only in young children
 Enlarged lymphatics from other causes for ex
 TB, Erythema, Malignant Growth.
 Sacculated or diverticuli of Esophagus
 regurgitation of food etc.

Treatment Prophylactic treatment change climate usually
 Simple Goitre to Seacoast. Med. Iodine is Specific.
 (Hale) Proper use of Iodine & their Comp. 90% of
 Simple Goitre can be cured or so far
 improved that they will not require operation.
 Pure Iodine or some of Salt Iod. usually
 Internally & Externally almost eternally.
 Internal Pure Iodine 1 drop 3 times a day
 for form K.I. 5 to 10 grs. 3x well diluted.
 Locally apply at night wet foot with
 10 to 20% solution of Iodine or Iodine ointment.
 or 1/2 oz. of Iodine painted over surface every day
 24 hours Iodine used till throat & taken out
 with Dilute Aq. Potas.
 Lincaster, the iodine in 2 drops. 3x a day

fortifying with strychnine if there is disturbance
 of the nervous system.

1890. 1901. 1902. { Hal. & ... in cl.
 1891. 1901. 1902. { ...
 1901. 1902. 1903. { ...
 1901. 1902. 1903. { ...

May recur after removal.

This treatment acts best in young &
 in early disease.

Feb. 7. '06

Thy. Complications in infectious Dis.
 quite often becomes congested & some
 change in Parenchyma & some of glandular
 spaces do not contain secretion but
 in their space disintegrated cells.
 other evidence of change is that colloidal
 material changes in character & shows
 different reaction. Suppuration of Thyroid
 may occur due to invasion of Microorg.
 Staph. or Staph. When suppuration occurs
 gland usually breaks externally may break
 into trachea or Esophagus.

Evidences of Sup. are Swelling, Pain, Temp.
 & general symptoms.

May have Acute Gland. alone (Thyroiditis)
 When gland breaks down usually heals
 rather quickly. occasionally a sinus will
 remain indefinitely.

Following Infectious Dis. may have
 a sclerosis or fibroid change.

Core or gradually resulting sometimes in
 Myxedema & impaired mental development.

Thyroiditis sometimes complicated Rheumatism
 also. Pharyngitis, (T. T. & in most cases there is
 some sclerosis. It tends to disappear) Cancer
 may occur. Syphilis is quite common more
 especially in Heredity.

Best name - hypothyroidism is
 congenital + Weyfer.

From infancy to Puberty Myxedema?

" Puberty Myxedema.

These three diseases are characterized by
 changes in the skin a Pseudo Epitheliomatous
 condition - thickening of skin, a cachectic
 + non development of Mental faculties
 in the adult impairment of Mental ..
 In young and old alike the same

Treatment of all these conditions is Prolonged
 Thyroid indefinitely.

Feb. 12.00. Graves or Basedow's Disease or Exophthalmos.
 In contrast with Myxedema it is
 a hyperthyroidism or increase or
 perverted function. Shock has that to
 be cause + anxiety any severe nervous
 strain probably are exciting causes
 frequently evidence of unstable nervous
 system. Auto-intoxication may be factor.
 Disturbances of Sym. Nervous System as
 always observed some believe that Gravitational
 condition is secondary to nervous system
 + result of Change in Sym. N. System.

Symptomatology. Increased action of heart. Tachycardia
 ranging from 90 to 140. enlargement
 of Thyroid. may be slight or moderate
 but usually very great. Exophthalmos,
 more or less marked in most cases
 general nervousness, irritable condition of S.S.
 Patients otherwise calm are irritated
 at trifling noises. Emotional
 fine clitterous tremor, in extended fingers
 Digestive organs periodical diarrhoea
 worse when patient is very nervous
 Anorexia or irregular appetite.

Nausea Vomiting. abnormal thirst & anorexia
latter not constant. Respiratory organs:
some atrophy of Pectoral muscles
interferes with Inspiration. Expansion
between 2 & 3 in. Consequent increase
in frequency of Respiration.

Nervous symptoms. inability to converge
eyes. lagophthalmus headache, neuralgia
& pains resembling Preordial distress
mental disturbances. Hallucinations. depression.

Conditions of Skin. Increase perspiration.
flushing & sensation of Heat. occasional
rise in temperature. Diminished Electrical
reactions. resistance. tendency to loss
Hair. dry & brittle. some atrophy of Nails.

Condition of Kidneys. Polyuria.
albuminuria. Increased uric acid.

Generative System. Menstrual disturbed
loss of Sexual desire even to impotence
debility. loss of weight emaciation. cachexia.
& often! Edema especially of lower extremities.

Treatment. Surgical or non-surgical (,
try latter first.

Treat may be medicinal & Hygienic should
be protected from all nervous & mental
irritation. Keep them quiet. Tachycardia
diminishes sleep better.

Rx

Pot. brom 3 VI.

Tr. Strophanthus 3 ss.

Elixir Simp. q.s. 3 III.

Mf. Sig Teaspoonful in water 3 times a day.

Antiseptic. Salicylate of Soda
15 or 20 grs. 3x day.

Hydrag Bism

gr. 1/30

20d. of chocolate

gr. V

Follow up 20 3x day

(Transferred to 253.)

Surgical Pathology — Prof. Lutz —

The cell is not a simple substance
has a life is nourished & dies
Life of all organisms is limited.

Functioning means waste.

Characteristics of cells:

Unicellular movement. Changes in exterior
of cell not about by changes within
& change in form.

Cell takes on nourishment & has
power of reproduction, the reproduction
of cells is the formation of new tissue.
Called Embryonal tissue. & a
conglomerate of new tissue
granulation

Cells possess irritability characteristic
in wound healing.

Wound is anything which concerns
continuity

An incised wound is one clean cut
with a sharp instrument

Lacerated wound concerns a larger area.

In an incised wound we notice a
gapping & a watery substance lymph
made up of plasma & cells forms or comes
to the surface also does blood

These undergo chemical changes the
blood coagulates & glues together the
surface of the wound. Later on Nature
unites them permanently.

New cells are formed, grow & take the
place of ones destroyed. This is a reproductive
process. An inflammatory process follows
infected part. Cell healing is the result
of new tissue formation.

These new cells come from the wound or
permanent cells of the wounded locality.

All new cells are formed from cells of a like nature & the fixed cells produce cells of their own respective types.

A Trauma acts as an impregnation of the cells. These new cells form granulation tissue which is developed into permanent tissue.

These new formed cells require nourishment & therefore blood & spaces are formed within the new tissue & from an existing blood vessel projections are thrown out.

This wound healing is result of new formed tissue & not by direct union.

Oct 19/05 Vascularization.

Granulation tissue needs & requires nourishment brought about by formation of new vessels made up of new cells formed from old vessel & project in a budding manner from vessel that have been ruptured & healed.

These blood vessels grow rapidly & project the highest part of the granulation tissue & are very numerous. These blood vessels are quite numerous at first & there is a large anastomosis of branches. When the embryonal tissue becomes more of the fixed type the tissue is contributing to in this manner does many of the red blood cells they become degenerated - out of them what is left is just necessary to nourish remain.

A tumor is hardly distinguishable from granulation tissue & a Malignant tumor is always embryonal.

Reatrigation is the process by which embryonal cells are converted into permanent tissue.

On development cells approach the likeness of the mother cell & not like the permanent stage & each cell is at a like cell population tissue is built.

These new cells have various shapes contain a large amount of protoplasm & a protruded edge or pseudopodia like process which enable it to combine with other cells to form the tissue. In the cells become more perfect the protoplasm becomes less in amount.

The Epidermis is formed from the epithelium of the adjoining skin at the margin of the wound.

These epithelial cell wander & become attached very far from the original place of formation.

This may occur in a hair follicle or a small bit of skin from the wound & from the epithelium of this new tissue forms. On this is based the process of grafting.

Grafting is done when the process of skin have been destroyed & as the population tissue forms & having such power of reatrigation as to reform the epithelium put in patches of skin are taken from another healthy part & laid on the injured which by mechanical means is attached for a short period till process of new formation begins.

The greater part is around the more granulation tissue - required to repair of these various but tissues - be cut in opposition with their like tissue - these will be less scar a better & quicker union. If muscle & fascia are cut together a connective tissue unites them & the scar will be less firm any wound - be source of a bursa. Thus all tissue should be cut together separately & sooner better - in doing this don't rely on touch alone but use sense of sight by pulling apart the parts & seeing the actual condition.

The granulation tissue is called Callus.

& is divided into temporary & permanent.

Source of granulation tissue - It is formed by any material which will produce osteoblasts - is chiefly by Periosteum & Dermal layer.

While Callus cannot be formed till the bony shape is stopped & blood gotten rid of. Fibre is rarely torn in this position & the blood lies internal & is not infected & is absorbed very readily.

In the Bone - Broken the same force usually tears the periosteum & the result

there is a cause for formation of Callus.

In last place the periosteum acts & the dense part is last. as this has to become softened & bone union will take place sooner. Mechanical force is to be applied - when up the parts before they set in - the influence to outwards & out away the dry dead material,

At the Periosteum is torn away the internal part of the bone is active & forms the External Callus - next the Callus of Endosteum from the internal Callus & last from Periosteum of Bone - is most important Callus.

As these cells form the scar as a splint
in supporting the bone & the final
scar is essentially a derivative from the cells
which are laid between the same substance.

Disturbed Repair - Inflammation.

Disturbed wound extends to entire economy -
Regions or Local disturbance.

Inflammation means infection for surgeon.

Bacteria grow on Devitalized tissue.

Vitality destroys Bacteria. Normal Blood
good Germicide.

Bacteria to infect must appear in great
enough numbers.

Extent of Inflamm. depends on virulence &
number of Bacteria.

Disease is disturbance of function of Organ

Pus producing Bacteria.

Bacteria do not create disturbance but
change in tissue & wound secretion & Embry cells.
First disturbance is local. 2nd is circulatory
disturbance in surrounding.

g. Hyperaemia & Blood slowed. For repair

2. Disturb. of capillary walls by products
not about by Bact.

affects cell ^{connective} substance which hold together.
Cells become ^{rough} thick sticky.

Connective substance is broken down. Cells are
found with stigmata.

On 2nd Sept. 1905. In the blood of a patient with
 In streptococcal sepsis. The bacteria are
 abundant in the blood. They are attached to
 wall of blood vessel.
 Emigration of leucocytes. The blood is
 leucocytosis.

Nov. 7, 05. Albuminous substances formed serum foci
 = Intercapillary cell mainly on albumin.
 Bacteria are removed by leucocytes by phagocytosis.

Nov. 10, 05. Local Infection:
 1. Cell on devitalized tissue - attract albumin -
 Cell is composite structure - furnish
 culture media for Bacteria.
 Growth depends on the degree of devitalization.
 Forms are result of Bacteria on devitalized tissue.
 Macroscopic symptoms:
 Heat - increased blood supply - augmented nutrition
 There there is infection the blood furnishes
 material & may serve to carry away.
 Normal reactions have bactericidal action.
 May be increased injury.
 Redness - Dilatation of blood vessels in
 the area. Reproductive & Explanatory processes
 occur together.

Nov. 14, 05. Coagulation necrosis is superficial affection -
 causes an exudate & area for exudate.
 When should be removed by scraping.
 Necrosis, bactericidal material etc.
 Wound should not be closed till it is able
 to heal.

Influence of localities on general condition.
 Influence on 1. Nerve 2. Blood designated
 * as sepsis: a disturbance in blood as result
 of infection & seen to in a fever &.

Resultant of P. reflexive organisms.

Range of Local Dis. is in cases, sepsis continues as long as Local Dis. Elevated temperature is index of Sepsis. Local infection should be treated to check Sepsis.

Record of Temperature & pulse should be kept as an index of sepsis also an examination of the general system. Examination of Blood aids in determination as Leucocytosis is generally present & especially indicative of deep seated supuration.

Nov. 22, '05

Blood changes

Leucocytosis W. Bld. Co. increased & increased fibrin. In local Disturb Leucocytosis is Physiological. as attempt on part of nature to serve a purpose. W.B.C. contain Paraproteins.

W.B.C. are of low vitality & lose constituents & coagulates readily.

Acute Suppurative Process.

Def. of Sepsis & Leucocytosis.

Typhoid Fever gives rise to Sepsis.

Thrombosis is coag in Bld. Vess. & Endothelium parts. due to Leucocytosis & other.

This Thrombus may result in Cardiac Thrombus or Metastatic inflammation by virtue of it being able to carry Organisms.

R. B. C. are decreased & thus decrease oxygen capacity.

Nov. 24, '05.

Erysipelas infectious. organism enters thro' wound which may not be recognized.

Infection readily converges.

Bad prognosis when Mucous Membrane of Atlas Red, attacks other & some skin.

Ordinary may cause closure of Paget's by tendency of inflammation to infect.

Limited itself to Lymphatics of Skin.
 Bacillus similar to Streptococcus
 Wounds are often involved at beginning
 Inflammation may not result in Pus.
 Pus is incidental of one kind of infection
 Ex. Self limited Disease
 Ex. furnish predisposition to same disease.
 Latent danger to skin.
 Self limited disease heat symptoms
 Internal medicine do little good.
 Antistreptococcus serum should be used.
 s. Extreme Contagion of Disease & carried
 readily

Tetanus Microbe is anaerobic - non pus producer.
 Best growing in deep seated &
 poorly drained. It is an omnipresent Bacillus
 Bacillus is present in Intestine of Horse.
 Results in transformation to Toxins
 & Toxins travel along nerve to Brain &
 Toxins act on Brain & S.P.C. due to
 tonic contraction of Muscles & Temporal.
 " " Flexor Muscles of Trunk.
 symptoms Stiff Neck.

1 Cannot open mouth seen by
 Erector Muscles of Neck. Board like Abdomen.
 At first are Clonic - relaxed

" Opisthotic.

Unusually high Temperature.
 Visible wound is suppurating. should be cleaned.
 High temperature from Muscle Contractions.
 Give for Water Warm water should
 be injected into Bowel.

Disturbance increase secretion & when secretion
 cannot escape Bacillus move ^{back} to act
 as wound in hand & foot below & above
 in such wound it should be well opened
 & cleaned.

Wound should be opened, cleaned, & packed
never sew up till perfectly clean.

Drug treatment is Symptomatic.

Morphia, Chloral, Bromides, Hyposulfites.
Fowler's Solution. Antitetanic Serum.
Where tetanus occurs almost simultaneous
it is most virulent. Longer existence
better the chance for recovery.

Dec 5 '05. Inflammation^{action} disturbance in cell formation.

T.B. properly planted causes cell formation.

↳ Toxins modify growth

Dec. 8 '02. Gangrene death? a part medical + Surgical condition
Diabetes next to injuries produces most
Gangrene.

Dry where part remains dry moulds & do
not furnish soil for Putrefactive Bact. also
Proteine Bacteria.

Line of Demarcation may be indicated but
does not act on dry part as Bld. Supply is
gone. Altered way to destruction.

Wet Gang. as result of Union Recultivation
good ground for action of Bacteria
Also Putrefaction + Better Soil for
Absorption.

Causes of Gangrene are as a rule noticed
before gangrene.

Trauma by interference of Bld Supply or
injury to all parts.

Such limb should be elevated, surrounded
to prevent evaporation, application of heat
Cleanliness

Line of Demarcation limit of circulation in skin

Dec. 12, '05.

Shock genuine term including many changes.
 Aramed & Brain & spinal Cord Disturbance of Central
 Nervous Sys. not known.

Exhaustion of Central Nervous System.

Relation of Hemorrhage to Shock.

Effects depend on part of Bld & on Individual.

Small Rapid pulse taken large amt of Bld is lost.
 due to less stimulation of Heart may increase &
 cause exhaustion.

By without nutrition of Bld to Cord & Brain we have
 shock much augmented. Haem causes shock.

Treatment stop bleeding.

Use of saline solution, warm applications.

No alcohol.

Dec. 15, '05.

Shock profound disturbance of Nervous system.

Delirium disturbance of ordinary thinking

- surroundings relations.

Sudden withdrawal of Alcohol causes symptoms
 same as crisis

Alcohol abused is followed by degeneration

of Excretory Glands.

Give few foundations for reproductive process.

Use strychnine. Opium for sleep.

Care of injury examine habits, avoid with new.

Bleeding from small Blood vessels - 'Bleders'

Hard to stop. Elbow, knee, ankle joint.

Due to changes in tissue permeability.

walls may be thin, may be degenerative

changes where there is a thickening

Use pack.

Dec. 19, '05.

Anesthesia - Ether & Chloroform.

for producing sleep & relieving pain.

1. If anesthesia should be general or local.

2. Condition of Patient if fit for ether or chloroform.

Amount of each determined on P. in each

" " " " by Physiology action.

Phy action begins on higher centers.

At first reflexes. Reflexes abolished last at Pinnarum. Voluntary muscles first to relax.

Jan 2, '06. Surgical Pathology deals principally with three things: 1. Repair of Wounds, Inflammation, Necrosis or New Growth.

Tumor: A swelling & is inadequate & wrong meaning of new growths such as neoplasms. Tumor should mean a new growth a new growth which has no physiological function, & permanent growth.

New growth occurs internally & externally. Internal medicine has performed the best diagnosis in discovery of internal growth. All new tissue formed must be from like tissue.

Skin must have been developed from ectoderm. Carcinoma from Embryonal epithelial cells.

New growths must start from Embryonic tissue. Embryonic tissue retains its characteristics in the new growth & the more of this Embryonal Characteristic is the more malignant the new growth.

Rapid growth & Embryonic Characteristic of tissue are the two important features of Malignant growth.

Sarcoma, in young, are most malignant of new growths.

Jan. 5, '06. New growth grows independently or at expense of body. Neoplasm not interfused with general body. Lipoma resembles fatty tissue.

Heart accumulates fat. When tumor grows into tissue called tissue infiltration Malignant. or may grow between organs, or parts. Benign. Fat passes from subserous parts to intertissue. Symmetrical tumor due to Menstrual disturbance.

Jan. 2. '06.

Malignant tumor have tendency to enter tissue from outside. New growth results from self proliferation. Result of embryonic tissue may be congenital or acquired. After have growth of granulation tissue. New growth not due to infection. Oxyacetic acid to destroy new growth. New growth possesses life of its own. tho' not separate.

Does not disappear spontaneously, as a rule. Infiltration causes inflammation & returns in local or metastatic. Benign is usually encapsulated or limited by border & may be pushed away. May persist on touch etc. Remove early removal. may disturb internally. Danger in removal of suppuration.

In removal think of making part useful.

Jan. 16. '06.

Bones are separate & become united are developed from numerous centers. Junction of Epiphysis is cartilaginous. Bone tumors are more ^{benign} ~~malignant~~, grow slowly.

Exostosis is an outgrowth of Bone.

Covered with Cart. which may be converted into bone. Covered with Bursae to protect muscles etc. occur in Neighborhood of Epiphysis. When on Skull must be differentiated from Syphalio.

Nasal Process of Sup Max Exos are symmetrical. Bone are arisurios by influence exerted on surrounding tissue. Should be removed when interfering with neighboring structures or when in them selves are undergoing changes & containing other elements may become malignant.

Fibroid small hard smooth grows by pushing away parts. is rare form.

Keloid a form of fibroid grow ordinarily upon scars. Don't operation Keloid.

New growth causes pain in Sciatic nerve

Neuroma fibroid growth within sheath separating Nerve Bundles.

Myomata are prone to take on growth which interferes with their life

Jan. 23.06. Malignant is clinical term which expresses behavior & its clinical characteristics. Recurrence after removal. fast growth requires large Bld Supply. involve body the lymph channels white Sarcoma tho' Bld.

Phosphoric acid do not use Thyroid Extract.
Serums with questionable results.

Vegetables & Fruits small amt. Meat,

Eggs & fish used

Removal of part of gland

may recover without treatment

Most recover after treatment may
remain well indefinitely period

tendency to return when under nervous
strain.

Cretinism Infantile Myxedema,
common in Switz & occurs sporadically
in most countries. cause unknown,
except frequently a nervous disease in
family & not perfect development.

May not be recognized at birth of child,
but after first few months will no
develop mentally. learns to talk slowly
skeleton does not grow right physically
dwarfed in every respect. skin more or less
shriveled, dry. very little perspiration. (in
contrast to Exophthalmic Goiter where skin is off.)
Child attains untreated a normal degree
of development. borders on imbecility.
Do not imitate have nothing original. no
evidence of paralysis as in children who
cease to develop from central nerve lesion.

Some Cretins may have increase in
size & function but never attains a
perfect condition

Treatment: Begin at once with desiccated Thyroid
start with small dose $\frac{1}{4}$ to $\frac{1}{2}$ gr. two or 3 times
after meals. watching effect, specially condition
of circulation. May increase dose.

Must be continued for months before
results are noticeable. & continue it for
years possibly for life.

As they grow & develop power does may
be pushed out continued.

Infantile: develops later in life not
congenital - become especially apparent
after puberty may be absent in many
cases - in some cases.

Dist: same as Creatinism different action
on thyroid.

Excessive type - believed to be due to imper-
fect development of arterial system.

General symptoms which char. Creatinism,
altho' in a lesser degree.

Treatment same as Creatinism.

Senility developing in early period. tissue atrophy.

Myxedema same etiology develops later.

In individuals who have been perfectly
well previously. general symptoms.

Etiology (some acute disease probably)

mental faculties. Tendency to
melancholia, Hypochondria, Pseudo dementia.

Thickening of skin without pitting as
in ordinary dermatous conditions, a dull
expression, tongue pains thro' body, paraesthesia
Headaches & tendency to some local
hemorrhage & Mucous Mem. irritation
of vocal folds, & Menstruation.

Treatment: in general the same. 5 gr. in adult 3x day
increasing gradually to 5 gr. if patients stand well.
symptoms usually improve rapidly but the
disease is chronic.

In senilis a Thyro + Strichnia + Arsenic often
tends to delay the process.

In Bright's Disease with evidence of Arterio Sclerosis
Hypert. Heart High Blood pressure is beneficial.
Menstrual Disturbances in developing girls
it is good (1905).

Titany has been reported. It is known as to a

in a trative & in functional neuroses
 Paralysis Adiputans. also hemorrhage; combine
 with Calcium Chloride. 10 to 15 grs. in water.

Feb. 21. 06. Chronic Rheumatism. occurs usually as a
 primary condition or secondary to acute.
 Constitutional condition. not infectious.
 not caused as in acute rheumatism
 exposure to cold & wet in those who are predisposed
 may contribute to it. also a defect in
 Metabolism resembles in this way Gout.

Path. Pain & stiffness about joints single or
 multiple. often several involved. indicates some
 irritation at this point & ligaments & capsule are
 thickened. some injection of synovial membrane.
 rarely active inflammation. necrosis of bone some
 Severity of these symptoms are no indication of
 character of place about the joint. In protracted
 cases there is a certain amount of atrophy of
 muscles controlling the joint involved. rarely
 ulcers occur. In middle age. symptoms
 are usually chronic.

Symptoms. Pain & stiffness in joints begins
 with cold. leading to rigidity & restriction of motion
 usually in some large joint. Hip. Shoulder, etc.
 usually no swelling or redness. if smaller joints
 are involved it is less pronounced than in some forms.
 Symptoms occur at intervals & may be severe
 and last several days or weeks. Do not
 go away well.

Prog. As a rule chronic & slow.

Treatment. Exercise. should be continued in small
 the same amount. Some benefit. Relief nervous
 system plenty of rest. but this is of little
 use to promote the action of the system.
 Potassium Iodide. 5 grs. 3 X a day
 for some time. To improve the circulation
 of the blood & to prevent the formation of
 uric acid.

Gouty Rheumatism, Myalgia. Joint
inflammation. Deformities, usually in the feet. Gouty
Kumbage. Some natives.

Etiology: The most important, other than
Rheumatism + Gout are predisposing factors.
Symptoms: Pain usually in the
the muscles, dull aching. Gout, acute, is more
is acute usually last of the day. may be
due to an acute inflammation in the feet.

Feb. 26.06. Treatment: Rest. Turkish bath followed
by vigorous massage of muscles of
back. strapping affected part. specially
Pleuridene. Acupuncture leave 10 minutes.
Morphine in bad cases 3 gr. follow with massage.
Small doses Pot. so. rub. Strychnia. tend
to relieve protracted attacks & prevent recurrence
1st 3 gr. 3X

Stry 30. 3X as patients stand (twitching fingers)
Salicylate in some cases where pain & tend to
prevent attacks.

R. Sodii Benzoate.

Lithia Benzoate

Sodii Salicylate.

Pot. Citrate π 3 ii

Glycerine π ii

Liqua Cinnamon q.s. 3 ii.

1 teaspoonful in glass of water every

3 hrs.

Gen. Etiology: constitutional disease
usually hereditary. presence of
excess of uric acid in blood or tendency to
hyperplasia of uric acid salt from fluids.
Cause vented symptoms. Constitutional is apt
redue to hereditary metabolism. This salt
deposits as Benzoate of Soda. found to some extent
in acute & chronic cases. Occurs at any age more
manifest after middle life. Alcohol is taken on

Paresthesias. Hot itching feet at night spoon
 of castings of gut. Cramps of Muscles. Periodic
 excess of uric acid in urine. (Uric Acid Showers)
 Oxaluria. Minute quantities of Albumin are common.
 Transient or continuous for years. Hyaline Casts.
 Chronic Bronchitis troublesome in Winter, Cuts.
 Haecoma. Apoplexy. Diagnosis: Acute Gout by its
 Solitary involvement of joints. Chronic Gout
 joint symptoms accompanied with Constitutional
 symptoms. Treatment: Acute: Rest, elevation,
 Heat as hot as can bear, follow with Opium
 application made by Hot Compresses surface wet
 with Tr. of Opium. Internal:

X. Tr. Colicoid acid

Sig 10 drops in water Every 6 hrs. watching
 constitutional effects & depression.

Laxatives: Calomel, Salicylates, Aspirin,
 Sarsaparilla 1000. & 3 gr. Caffein Citrate. 3 gr. in.

Mar, 5, 06. Chronic Gout Treatment. Constitutional required
 Attention to mode of life & diet.
 General Hygiene. Open air, to improve Oxidation
 this stimulates circulation & excretion.
 Joint undisturbed. Complaint of Cold. wear flannels.
 Frequent baths. Cold water to be used. Hot
 bath in morning & evening. Reaction
 is poor stop Cold. Hot bath at night
 used to stimulate reaction.

Diet. Lots of Water. Pay attention to Uric Acid.
 Some water in diet. Food. Cream in Uric Acid
 Restrict Nitrogenous foods. Game or Beef. Meat
 Bar Beef. Eggs Moderate. Milk, Vegetables & Fruits.
 Bananas & Oranges. Apples. & so on. Fat is good.
 Moderate amt. Coffee & Tea. No
 Malt liquors at all. Whiskey is best, not between meals.
 Regular. Night make good. train
 Salicylates indicated. Potassium iodide for elimination.
 Lithid. Citrate, 3 grs. 3X in water 3X in water.

don't go beyond 3 syr. tablets. tendency to vertigo
 100 gr. *phosphorus*

R. Mag. Sulph. $\frac{1}{11}$
 100 gr. *phosphorus* $\frac{1}{11}$
 100 gr. *phosphorus* $\frac{1}{11}$
 100 gr. *phosphorus* $\frac{1}{11}$

Syr. *phosphorus* 6 grains in water.

Nov. 7. 06. Scurvy: Etiology: Poor hygiene & diet in diet.
 Lack of green vegetables & fresh meat. Hygiene
 known. probably. *ascorbic acid* is a + hygienic
 salts. 2. toxic elements in food over-insulation
 occupation: sailors, miners, & soldiers are more
 susceptible to disease. more apt to be deprived
 food. poorly fed prisoners & patients.
 Miners in ill-ventilated pits: not knowing Etiology
 & remedy. tendency to the in under Mucous
 membranes & skin. gum swell. erosion &
 loosening of teeth. Leucocytosis. general deg.
 of peripheral nervous system. not slow. losses
 in weight becomes weak, pale, after a time
 spongy gums tendency to bleed on slight irrit.
 to the may become very loose as in solution
 & may remain as few. tongue coated, mouth
 red & is much swollen. Skin dry & rough
 tendency to subcutaneous hemorrhage. rashes
 into deep tissues. edema of limbs helped by
 to cond. of kidneys & of circulation pains
 in limbs & joints. constipation always. *irregular*
 & characteristic. may be subcostal
 hemorrhage. & some new row of bone. *Di. Mag.*
 Rheumatism. History & general symptoms.
 A Rheumatic patient would have more severe
 purpura exists on surface come on suddenly.
 without previous symptoms. & with some other
 constitutional disorder. Prog. good except in late cases.
 Fruit juice & fresh meats. Tonics. Baths etc.
 Fresh meats fresh fruit. Blood of trace of iron for 10 to 20 p.p.m.

Infantile Scurvy: Imperfect food often associated with Rickets. Art. feeding, may do it in Nursing children, milk may not be suitable. Condensed & prepared milks more apt to cause it. Symptoms are much the same, lower limbs & joints most affected. Scurvy gums. Cry out when moved one of first indications. Abscesses may occur in limbs & Sternum. Separation of Epiphyses of Bones. Paralytic symptoms. Temp. erratic.

Treatment: Proph. art. feeding use some fruit juice, yolk of soft packed egg, once a week a Day. Orange juice.

Apr. 17. 06. Sun. Stroke. or heat stroke caused by exposure to excessive heat. Specially to the Sun may occur in enclosures. Soldiers suffer in summer more common in cities. Sometimes cold & snow. occasionally in country. Alcohol exciting cause. Pathology: Congestion of all tissues, increasing degeneration. Signs of it develop quickly after cholera. Symptoms: An indiv. normally should prosper. perspiration ceases, rigors set in, in fact, face red. Skin injected. Breathing gasping, coloration, vomit, and vomiting may or may not. may gradually pass into unconsciousness. may die of partial or complete Coma. may last for a short time of several days. Breathing short, stertorous or snoring. Rapid use in decomposition. 104 to 112 Temp.

Twitching of muscles. later relaxation. pupils dilate & then contract. pulse full & bounding. Body red & dry. Symptoms of it gradually fall off under proper treatment. (After symptoms, indiv. who has had an attack cannot claim to be cured. may last in rest if.

Heat Exhaustion: weakness, exhausted feeling.
Cramps in muscles, giddiness. Intermittent
nausea, vomiting or some mental confusion
+ no. severe cases. even as 16. in a
few cases. could be more in such cases.

Diff. 2 var. spec. a brown (hemine) form.

Carotid. sin. 11. nates. (11. unius) 17. 1/2. 1/2.

Feb. we may agree with the

42 Cont. ess. 5 en de.

Urencia Coma ad. ♀. Jan. 1890.
+ 1 imp. ap. 1 x y. 1/2 in. no yms. spec.
of ventral muscles. Temp.

Treatment of the nose in upper lip Cold
Cold on nose just thing. Temp 60-62.
in return. do not reduce temp too low.

1 yd. in water. when fresh. it was as
Myomys, Phlebotomus pale + blood any 1st.
cont. in mylar to at, cool water. use 24 us.
Myoderm Saline for Kidney. Watch Pat.
+ give this as indicated. when conscious are
out. say v. a mile.

Tr. Heat Ex. Opposite measure. Skin from
beginning, 14 pc. Saline. injection. plate
for pain. Light diet. A new day of
but / sang. Both Conditions may be
gone but consolidating.

Mar. 19. '06. Diabetes. Insipidus. Began by passage of large
quant. urine for a considerable time.

Children. Found in young ones, children,
infants, more common in males. 23 of 71 members
of the family had the lungs & at least one.

Idiopatische + Zoonosen.

Dis. case seen without apparent cause. Large
green water after with fungus excised on 11.

Secondary injury to nervous system Head, Br.
+ Spinal injury or disease especially Brain or Spinal
Cord - most cases found near the injury.

Mo., 28, 06.

Anemia: Secondary type. Simple deficiency in substance of Erythrocytes in their number or in the plasma of Blood itself. applies especially to red cells. Color of skin is not always an indication of the degree of anemia. Color of mucous membranes more reliable. Changes taking place: in beginning No. of Erythrocytes not much changed, change begins in the substance of Corp. Corp. average smaller as anemia develops. color of midline corp. diminish. Lowered specific gravity. Change in shape of Erythrocytes great variation in size. Endoglobulin changes. vacuolation, & granular changes may occur peculiar staining reaction. No. of cells gradually diminish. Anemia from Hemorrhage.

lose 2 to 4 lbs blood & recover. Loss of Corp. & Plasma immediately after hemorrhage shows dim. in Red Corp. but punctated red cells & slight increase in leucocytes. If severe Hem. sometime after some degree of anemia may exist but blood is quite rapidly restored, first water & salts & albumin of plasma, next increase in corpuscles averaging smaller than normal. Color gradually returns, New Corp. show dim. in Hemoglobin. Rate of Recovery depends on degree of Hem. & cond. of individual, Norm. indiv. recovers quite rapidly. Chronic Disease more slowly. Second. Anemias due to

Q. 2. Chronic Disease. And Exhausting cases of
J.B. S. is the chronic infection. Blood has
usual characteristics. Prognosis poor. Some things
Mental work. Some cases. Some things.
I believe it possible, but not sure.

9.0 treatment for coronary disease.

Chlorosis, pale sickness. Stomach empty
and 17 to 18. ring some secretion but none
I found it to be normal. The patient
in a state of depression. If reality. I see
Hypnotic. Confusion, joint pains, & much

Bone marrow not specially different than in
 any other. Symptoms: Gastrointestinal
 chiefly disturbed. Gastro-intest. tract, some
 loss of appetite, indigestion. symptoms come slow.
 Shock or worry. Early signs are pale mucous
 membranes & lemon skin. pulse larger & soft
 fatigue on slight exercise. dyspnoea. vertigo.
 As disease progresses exhaustion becomes extreme.
 Rbc. falls to 4 or 5. Hemoglobin relatively increased
 Change in shape & size. rather large nucleated Rbc cells.
 Blood serum same. as bld. diminishes circulatory
 symptoms appear. Haemic murmurs. & weakened
 heart. Entire nose may have retinal & nostrils
 & other mucous membranes. Diarrhea.
 urine pale. Sp. G. low. Post. Lat. Sclerosis of Cord.
 Lit. Leuc. Addison's Disease. Brown Skin. not
 light but brownish yellow. Bright's Disease. Examine
 Urine. T.B. General History. Bld count not so low.
 Cancer. usually pain Prog. Cachexia very unfavorable.
 may partially recover with tendency to relapse.
 Secondary type may recover. Rest in bed fresh
 air & easily digested food most important
 medicine. Arsenic & Iron. Bone Marrow
 Moderate doses Arsenic increase with blood.
 1 or 2 drops increase per wk. till 20 or 30 drops
 after meals. Bone marrow in sandwiches.

April 16. Leukemia disease. Bld. making organs
 starve by increase of leucocytes. changes in
 numerous organs over entire body.
 Signs: 1. definitely known. deterioration some times.
 Metastases. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15. 16. 17. 18. 19. 20. 21. 22. 23. 24. 25. 26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 37. 38. 39. 40. 41. 42. 43. 44. 45. 46. 47. 48. 49. 50. 51. 52. 53. 54. 55. 56. 57. 58. 59. 60. 61. 62. 63. 64. 65. 66. 67. 68. 69. 70. 71. 72. 73. 74. 75. 76. 77. 78. 79. 80. 81. 82. 83. 84. 85. 86. 87. 88. 89. 90. 91. 92. 93. 94. 95. 96. 97. 98. 99. 100. 101. 102. 103. 104. 105. 106. 107. 108. 109. 110. 111. 112. 113. 114. 115. 116. 117. 118. 119. 120. 121. 122. 123. 124. 125. 126. 127. 128. 129. 130. 131. 132. 133. 134. 135. 136. 137. 138. 139. 140. 141. 142. 143. 144. 145. 146. 147. 148. 149. 150. 151. 152. 153. 154. 155. 156. 157. 158. 159. 160. 161. 162. 163. 164. 165. 166. 167. 168. 169. 170. 171. 172. 173. 174. 175. 176. 177. 178. 179. 180. 181. 182. 183. 184. 185. 186. 187. 188. 189. 190. 191. 192. 193. 194. 195. 196. 197. 198. 199. 200. 201. 202. 203. 204. 205. 206. 207. 208. 209. 210. 211. 212. 213. 214. 215. 216. 217. 218. 219. 220. 221. 222. 223. 224. 225. 226. 227. 228. 229. 230. 231. 232. 233. 234. 235. 236. 237. 238. 239. 240. 241. 242. 243. 244. 245. 246. 247. 248. 249. 250. 251. 252. 253. 254. 255. 256. 257. 258. 259. 260. 261. 262. 263. 264. 265. 266. 267. 268. 269. 270. 271. 272. 273. 274. 275. 276. 277. 278. 279. 280. 281. 282. 283. 284. 285. 286. 287. 288. 289. 290. 291. 292. 293. 294. 295. 296. 297. 298. 299. 300. 301. 302. 303. 304. 305. 306. 307. 308. 309. 310. 311. 312. 313. 314. 315. 316. 317. 318. 319. 320. 321. 322. 323. 324. 325. 326. 327. 328. 329. 330. 331. 332. 333. 334. 335. 336. 337. 338. 339. 340. 341. 342. 343. 344. 345. 346. 347. 348. 349. 350. 351. 352. 353. 354. 355. 356. 357. 358. 359. 360. 361. 362. 363. 364. 365. 366. 367. 368. 369. 370. 371. 372. 373. 374. 375. 376. 377. 378. 379. 380. 381. 382. 383. 384. 385. 386. 387. 388. 389. 390. 391. 392. 393. 394. 395. 396. 397. 398. 399. 400. 401. 402. 403. 404. 405. 406. 407. 408. 409. 410. 411. 412. 413. 414. 415. 416. 417. 418. 419. 420. 421. 422. 423. 424. 425. 426. 427. 428. 429. 430. 431. 432. 433. 434. 435. 436. 437. 438. 439. 440. 441. 442. 443. 444. 445. 446. 447. 448. 449. 450. 451. 452. 453. 454. 455. 456. 457. 458. 459. 460. 461. 462. 463. 464. 465. 466. 467. 468. 469. 470. 471. 472. 473. 474. 475. 476. 477. 478. 479. 480. 481. 482. 483. 484. 485. 486. 487. 488. 489. 490. 491. 492. 493. 494. 495. 496. 497. 498. 499. 500. 501. 502. 503. 504. 505. 506. 507. 508. 509. 510. 511. 512. 513. 514. 515. 516. 517. 518. 519. 520. 521. 522. 523. 524. 525. 526. 527. 528. 529. 530. 531. 532. 533. 534. 535. 536. 537. 538. 539. 540. 541. 542. 543. 544. 545. 546. 547. 548. 549. 550. 551. 552. 553. 554. 555. 556. 557. 558. 559. 560. 561. 562. 563. 564. 565. 566. 567. 568. 569. 570. 571. 572. 573. 574. 575. 576. 577. 578. 579. 580. 581. 582. 583. 584. 585. 586. 587. 588. 589. 590. 591. 592. 593. 594. 595. 596. 597. 598. 599. 600. 601. 602. 603. 604. 605. 606. 607. 608. 609. 610. 611. 612. 613. 614. 615. 616. 617. 618. 619. 620. 621. 622. 623. 624. 625. 626. 627. 628. 629. 630. 631. 632. 633. 634. 635. 636. 637. 638. 639. 640. 641. 642. 643. 644. 645. 646. 647. 648. 649. 650. 651. 652. 653. 654. 655. 656. 657. 658. 659. 660. 661. 662. 663. 664. 665. 666. 667. 668. 669. 670. 671. 672. 673. 674. 675. 676. 677. 678. 679. 680. 681. 682. 683. 684. 685. 686. 687. 688. 689. 690. 691. 692. 693. 694. 695. 696. 697. 698. 699. 700. 701. 702. 703. 704. 705. 706. 707. 708. 709. 710. 711. 712. 713. 714. 715. 716. 717. 718. 719. 720. 721. 722. 723. 724. 725. 726. 727. 728. 729. 730. 731. 732. 733. 734. 735. 736. 737. 738. 739. 740. 741. 742. 743. 744. 745. 746. 747. 748. 749. 750. 751. 752. 753. 754. 755. 756. 757. 758. 759. 760. 761. 762. 763. 764. 765. 766. 767. 768. 769. 770. 771. 772. 773. 774. 775. 776. 777. 778. 779. 780. 781. 782. 783. 784. 785. 786. 787. 788. 789. 790. 791. 792. 793. 794. 795. 796. 797. 798. 799. 800. 801. 802. 803. 804. 805. 806. 807. 808. 809. 810. 811. 812. 813. 814. 815. 816. 817. 818. 819. 820. 821. 822. 823. 824. 825. 826. 827. 828. 829. 830. 831. 832. 833. 834. 835. 836. 837. 838. 839. 840. 841. 842. 843. 844. 845. 846. 847. 848. 849. 850. 851. 852. 853. 854. 855. 856. 857. 858. 859. 860. 861. 862. 863. 864. 865. 866. 867. 868. 869. 870. 871. 872. 873. 874. 875. 876. 877. 878. 879. 880. 881. 882. 883. 884. 885. 886. 887. 888. 889. 890. 891. 892. 893. 894. 895. 896. 897. 898. 899. 900. 901. 902. 903. 904. 905. 906. 907. 908. 909. 910. 911. 912. 913. 914. 915. 916. 917. 918. 919. 920. 921. 922. 923. 924. 925. 926. 927. 928. 929. 930. 931. 932. 933. 934. 935. 936. 937. 938. 939. 940. 941. 942. 943. 944. 945. 946. 947. 948. 949. 950. 951. 952. 953. 954. 955. 956. 957. 958. 959. 960. 961. 962. 963. 964. 965. 966. 967. 968. 969. 970. 971. 972. 973. 974. 975. 976. 977. 978. 979. 980. 981. 982. 983. 984. 985. 986. 987. 988. 989. 990. 991. 992. 993. 994. 995. 996. 997. 998. 999. 1000.

Apr 18. 6. *Leucocytes* increase in number & escape to
in lymphatic flow over normal number.
increase never involves termination of
P.N. Cells. but always are also at same rate in
certain conditions & range leukocyte count
normally. Apparently, some individuals
may show variation from 2 to 10%.

Sphere Lev. 4. Plano. 10.

Physiology & pathology. The first lecture, 100/10.00. The second, 100/10.00. The third, 100/10.00. The fourth, 100/10.00. The fifth, 100/10.00. The sixth, 100/10.00. The seventh, 100/10.00. The eighth, 100/10.00. The ninth, 100/10.00. The tenth, 100/10.00. The eleventh, 100/10.00. The twelfth, 100/10.00. The thirteenth, 100/10.00. The fourteenth, 100/10.00. The fifteenth, 100/10.00. The sixteenth, 100/10.00. The seventeenth, 100/10.00. The eighteenth, 100/10.00. The nineteenth, 100/10.00. The twentieth, 100/10.00. The twenty-first, 100/10.00. The twenty-second, 100/10.00. The twenty-third, 100/10.00. The twenty-fourth, 100/10.00. The twenty-fifth, 100/10.00. The twenty-sixth, 100/10.00. The twenty-seventh, 100/10.00. The twenty-eighth, 100/10.00. The twenty-ninth, 100/10.00. The thirtieth, 100/10.00. The thirty-first, 100/10.00. The thirty-second, 100/10.00. The thirty-third, 100/10.00. The thirty-fourth, 100/10.00. The thirty-fifth, 100/10.00. The thirty-sixth, 100/10.00. The thirty-seventh, 100/10.00. The thirty-eighth, 100/10.00. The thirty-ninth, 100/10.00. The fortieth, 100/10.00. The forty-first, 100/10.00. The forty-second, 100/10.00. The forty-third, 100/10.00. The forty-fourth, 100/10.00. The forty-fifth, 100/10.00. The forty-sixth, 100/10.00. The forty-seventh, 100/10.00. The forty-eighth, 100/10.00. The forty-ninth, 100/10.00. The fiftieth, 100/10.00. The fifty-first, 100/10.00. The fifty-second, 100/10.00. The fifty-third, 100/10.00. The fifty-fourth, 100/10.00. The fifty-fifth, 100/10.00. The fifty-sixth, 100/10.00. The fifty-seventh, 100/10.00. The fifty-eighth, 100/10.00. The fifty-ninth, 100/10.00. The sixtieth, 100/10.00. The sixty-first, 100/10.00. The sixty-second, 100/10.00. The sixty-third, 100/10.00. The sixty-fourth, 100/10.00. The sixty-fifth, 100/10.00. The sixty-sixth, 100/10.00. The sixty-seventh, 100/10.00. The sixty-eighth, 100/10.00. The sixty-ninth, 100/10.00. The seventieth, 100/10.00. The seventy-first, 100/10.00. The seventy-second, 100/10.00. The seventy-third, 100/10.00. The seventy-fourth, 100/10.00. The seventy-fifth, 100/10.00. The seventy-sixth, 100/10.00. The seventy-seventh, 100/10.00. The seventy-eighth, 100/10.00. The seventy-ninth, 100/10.00. The eightieth, 100/10.00. The eighty-first, 100/10.00. The eighty-second, 100/10.00. The eighty-third, 100/10.00. The eighty-fourth, 100/10.00. The eighty-fifth, 100/10.00. The eighty-sixth, 100/10.00. The eighty-seventh, 100/10.00. The eighty-eighth, 100/10.00. The eighty-ninth, 100/10.00. The ninetieth, 100/10.00. The ninety-first, 100/10.00. The ninety-second, 100/10.00. The ninety-third, 100/10.00. The ninety-fourth, 100/10.00. The ninety-fifth, 100/10.00. The ninety-sixth, 100/10.00. The ninety-seventh, 100/10.00. The ninety-eighth, 100/10.00. The ninety-ninth, 100/10.00. The hundredth, 100/10.00.

following contaminants are present: 15, 40, 41.

Exercise vigorous increase of Int.

to 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100, 101, 102, 103, 104, 105, 106, 107, 108, 109, 110, 111, 112, 113, 114, 115, 116, 117, 118, 119, 120, 121, 122, 123, 124, 125, 126, 127, 128, 129, 130, 131, 132, 133, 134, 135, 136, 137, 138, 139, 140, 141, 142, 143, 144, 145, 146, 147, 148, 149, 150, 151, 152, 153, 154, 155, 156, 157, 158, 159, 160, 161, 162, 163, 164, 165, 166, 167, 168, 169, 170, 171, 172, 173, 174, 175, 176, 177, 178, 179, 180, 181, 182, 183, 184, 185, 186, 187, 188, 189, 190, 191, 192, 193, 194, 195, 196, 197, 198, 199, 200, 201, 202, 203, 204, 205, 206, 207, 208, 209, 210, 211, 212, 213, 214, 215, 216, 217, 218, 219, 220, 221, 222, 223, 224, 225, 226, 227, 228, 229, 230, 231, 232, 233, 234, 235, 236, 237, 238, 239, 240, 241, 242, 243, 244, 245, 246, 247, 248, 249, 250, 251, 252, 253, 254, 255, 256, 257, 258, 259, 260, 261, 262, 263, 264, 265, 266, 267, 268, 269, 270, 271, 272, 273, 274, 275, 276, 277, 278, 279, 280, 281, 282, 283, 284, 285, 286, 287, 288, 289, 290, 291, 292, 293, 294, 295, 296, 297, 298, 299, 300, 301, 302, 303, 304, 305, 306, 307, 308, 309, 310, 311, 312, 313, 314, 315, 316, 317, 318, 319, 320, 321, 322, 323, 324, 325, 326, 327, 328, 329, 330, 331, 332, 333, 334, 335, 336, 337, 338, 339, 340, 341, 342, 343, 344, 345, 346, 347, 348, 349, 350, 351, 352, 353, 354, 355, 356, 357, 358, 359, 360, 361, 362, 363, 364, 365, 366, 367, 368, 369, 370, 371, 372, 373, 374, 375, 376, 377, 378, 379, 380, 381, 382, 383, 384, 385, 386, 387, 388, 389, 390, 391, 392, 393, 394, 395, 396, 397, 398, 399, 400, 401, 402, 403, 404, 405, 406, 407, 408, 409, 410, 411, 412, 413, 414, 415, 416, 417, 418, 419, 420, 421, 422, 423, 424, 425, 426, 427, 428, 429, 430, 431, 432, 433, 434, 435, 436, 437, 438, 439, 440, 441, 442, 443, 444, 445, 446, 447, 448, 449, 450, 451, 452, 453, 454, 455, 456, 457, 458, 459, 460, 461, 462, 463, 464, 465, 466, 467, 468, 469, 470, 471, 472, 473, 474, 475, 476, 477, 478, 479, 480, 481, 482, 483, 484, 485, 486, 487, 488, 489, 490, 491, 492, 493, 494, 495, 496, 497, 498, 499, 500, 501, 502, 503, 504, 505, 506, 507, 508, 509, 510, 511, 512, 513, 514, 515, 516, 517, 518, 519, 520, 521, 522, 523, 524, 525, 526, 527, 528, 529, 530, 531, 532, 533, 534, 535, 536, 537, 538, 539, 540, 541, 542, 543, 544, 545, 546, 547, 548, 549, 550, 551, 552, 553, 554, 555, 556, 557, 558, 559, 560, 561, 562, 563, 564, 565, 566, 567, 568, 569, 570, 571, 572, 573, 574, 575, 576, 577, 578, 579, 580, 581, 582, 583, 584, 585, 586, 587, 588, 589, 590, 591, 592, 593, 594, 595, 596, 597, 598, 599, 600, 601, 602, 603, 604, 605, 606, 607, 608, 609, 610, 611, 612, 613, 614, 615, 616, 617, 618, 619, 620, 621, 622, 623, 624, 625, 626, 627, 628, 629, 630, 631, 632, 633, 634, 635, 636, 637, 638, 639, 640, 641, 642, 643, 644, 645, 646, 647, 648, 649, 650, 651, 652, 653, 654, 655, 656, 657, 658, 659, 660, 661, 662, 663, 664, 665, 666, 667, 668, 669, 670, 671, 672, 673, 674, 675, 676, 677, 678, 679, 680, 681, 682, 683, 684, 685, 686, 687, 688, 689, 690, 691, 692, 693, 694, 695, 696, 697, 698, 699, 700, 701, 702, 703, 704, 705, 706, 707, 708, 709, 710, 711, 712, 713, 714, 715, 716, 717, 718, 719, 720, 721, 722, 723, 724, 725, 726, 727, 728, 729, 730, 731, 732, 733, 734, 735, 736, 737, 738, 739, 740, 741, 742, 743, 744, 745, 746, 747, 748, 749, 750, 751, 752, 753, 754, 755, 756, 757, 758, 759, 760, 761, 762, 763, 764, 765, 766, 767, 768, 769, 770, 771, 772, 773, 774, 775, 776, 777, 778, 779, 780, 781, 782, 783, 784, 785, 786, 787, 788, 789, 790, 791, 792, 793, 794, 795, 796, 797, 798, 799, 800, 801, 802, 803, 804, 805, 806, 807, 808, 809, 810, 811, 812, 813, 814, 815, 816, 817, 818, 819, 820, 821, 822, 823, 824, 825, 826, 827, 828, 829, 830, 831, 832, 833, 834, 835, 836, 837, 838, 839, 840, 841

Rev. of increased Col. 1864

Time of our stay - morning, noon & in evening.

After violent release occurring med. by a strong cycle

may be more expensive to buy same amount.

1. May be pinned over as absolute or

There is a retrogression.

Cons. May - under T. pins

increase in metabolic rate.

parte leucocytes in distribution, - interioro

... over door and ceiling.

or because Toxophore / Toxoid may have lost its toxic element.

If injected in non-immune animal the Toxin Haptophore combines with available cell haptophore making Toxophore or toxic element of Toxoid to act up. The cause of symptoms of the disease. If cell function is too greatly disturbed by chemical drugs. If not the Toxoid or Toxin - is only anchored to the cell haptophore. When cell not very active to assimilate or absorb. Toxoid haptophore with its attached Toxophore the whole is cast off as waste.

By Virchow's Law the cell & loves but not haptophore by producing several instead of one. One only being required the others are cast off which cast off haptophores have same affinity as the original tissue is formed antibodies, antitoxin, or antibodies.

If an animal be injected with more blood in less than vital cell serum of animal acquires several new properties.

1. First: a few drops of animal serum added to a few drops suspended bacilli of same variety injected they lose their motility & clump due to formation of antibodies.
2. Same combination may result in a precipitate being thrown down in solution of suspended bacilli due to formation of antibodies.
3. By same combination. Bact. in suspension may be dissolved due to formation of antibodies.

Same phenomena may result by injection of blood or tissue cells, or a piece of animal into body of another. Causing Auto-Lysis.

Clinical Notes Dr. Crandall

Complement is in amount normal amount
which may exist in the normal amount
in the normal amount in producing

Dr. Crandall. Complement & Alex in same tissue

Oct. 5.06

P. age 51. F. H. reg. P. well till 4 yrs ago. then had
Clinical notes. sl. Enlarg. under arms no pain. Fell 3 yrs. ago struck in
back. 1 yr. ago P. began feeling weak in legs, glands under
arms became swollen. 40 lbs. with decrease in girdle
slight gastro-intest. symptoms. feeling fullness of bowels.
Bld. findings R.B.C. 2,200,000

Dif. Count.	Small Lymph	500	- 80%	normal.
	Large	25	- 41%	20-25%
	Pol. Nuc.	125	- 147%	1-4 "
	Eosinophils	0	- 0%	60-70 "
	Mon.	0	- 0%	1-3 "
	Transitional	5	- 1%	.3-1 "

Urine 1020. yellow. clear. alb. -, sug. -, few hyaline casts. Cachectic.

Lungs - Spleen extended 1 finger below Umb. & to Median line.

Case II Woman. 48. Hemorrhage from Mucous Memb. 30 lbs. weight.
marked dyspnea, Cachectic, limbs swollen. No Pain at all.
increasing weakness.

Bld. & C.

Diag. I Lymphatic Leukemia
.. II. Myelogenous ..

Small Lymph.	3%
Large	4 "
Myelocytes	40 "
Pol. Nuclear.	45 "
Eosinophils	4 "
Mon.	2 "
Transitional	2 "

Prog. Progressive form neither very bad 1-3 yrs.

Lymph. rarer more severe.

Cause unknown. Nervous strain. Shock. Syphilis.
infectious disease.

Treatment: Arsenic full doses 5 to 30 M 3x a day

An abundance of Nitrogenous food required much is eliminated
by urine. support digestion. fresh air. lots of water.

Tr. Iron. & Dr. Nuxvomica equal parts.

950,000 RBC
3400 WBC
20% Hb

Copes: Colored.

1 sister dead cause unknown. Brother killed by accident.

P. Had Pneumonia: usually Children's disease.

Complains of Dyspnoea. for two Mo.

Marked Edema of lower ex. Scrotum tapped.

Urine normal. Pulse 128. Mitral Murmur

Some Bronchitis. Has had Rheumatism.

10 Feb. 2004.

Infus. of Digitalis.

Potass. Citrate.

Compl. of P. Hides.

Dry Diet.

Feb 12. 06. Starches & fruit, favor Hyperacidity.

Dyspepsia. Dyspepsia. Dr. Bicarb of Soda.

Mag. Sul.

Sig of Milk.

Diet Cooked fruit more broiled Milk.
restrict Sugar. Examine Eyes for Headache.
Drink water between meals.

Medicine. — Prof. Summar.

Stomach

In diagnosis 1st we determine the seat of the organ, 2nd the Pathological anatomy, 3rd Etiology.

Disease may be caused by Heredity, Infection, Intoxication, Physical factors & Diseases of other organs.

By Heredity is being born with a weak stomach etc. plays quite a part.

Infection

By infection the Stomach is almost wholly immune on account of the free HCl. & its onward motility aids next to acid is its inability to absorb. The presence of Mucous acids in destroying action of bacteria.

Intoxication

Intoxication is the chief cause of disease by Ecogenic from outside invasion or endogenous from inside.

Intoxication Means of protection
Physical factors

1. Vomiting especially more in children depending on position of stomach.

2. Emetics. Stomach acts more mostly. Stomach secretes water substance to dilute sharp substances, pepper, and we etc. for alcohol the secretion is more.

3. Intestinal secretion

4. Action of Mucous in Chemist.

Physical factors. Internal & External Intolerability.

a. Mechanical

1. Foreign body

2. Abnormal work of food.

Myelogenous (primary dilation)

A. Causes internal most common cause.

B. Thermal. Substances temp. too low or too high.

Below temp. as water takes influence to bring to stand.

Too high temperature may cause
 bilious colic & stomach
externally

Trauma - abnormal pressure from
 without due to - bad corset, wrongly tied
 skirt etc.

Abnormal pressure by wrong position
 probably Backache etc.

5. Causes by Other Diseases

Secondary function, healthy condition
 of glands

a. Blood disease

B. Nervous disease

c. Dist. / Blood - circulatory disturbance
 passive hyperaemia.

d. Acid disease.

e. Lung "

Portal vein "

Nearly all nervous & some of the stomach.
 Infectious & Constitutional diseases affect
 the stomach, causing vomiting etc.

Physiology - General & special physiology of the stomach.
 1. To prepare food for digestion.

1. Temperature regulation.

2. Dilators & too irritative or too concentrated

3. Disinfection of Food. Yeh

4. Mechanical diminution.

5. Chemical " solution of substances.

2. Digestion

(not undigested) perhaps.

Albuminous Substance & Plank.

Absorption of Stomach

1. Traces of Dextrin, Salts.

2. Moderate amt of Sugar

3. Alcohol

No Water.

How to Examine Stomach.

- a. Physical Diagnostic means. (Pathology & Anatomy)
 b. Biological Ex. (Stomach Contents)
 (Physiological Pathological Cond.)

General Symptomatology.

Motor Activity

Secretory Activity.

a. Increased Motility (Super) (Hyperkinesia)

a. Decrease " (Sub) (Hypo ")

Secretory

Increased Motility (Superacidity) / Hypo " "

B. Decrease " Activity (Hypokinesia)
 Anacidity = no acid.

Nov. 21. 05

Vomitus

Vomiting don't think of Stomach Disease
 Coughing, Sneezing etc. is Pathological.Vomiting Organs Participate as Brain
 Changes.

Vomiting is sucking of St. Contents into Esoph.
 there is violent contraction of Ab. Muscles
 Center of Vomiting in Medulla. near center
 Vagus. & Deep respiration when Nausea
 is present may overcome Vomiting
 Disease.

Vomiting induced by Physical effects.

Vom. is associated with disease of all
 organs supplied by Vagus nerve.

Irra. Matter etc. sup. by recurrent branch

By Post. Aur. Nerve External Canal of Ear
 Affections of Esophagus & when this symptom
 occurs all organs from above course should be
 examined which are supplied by Vagus.

When time to Stomach must be regular
 + at time of Digestion

Consequences
Vom.

Severe Vom may ^{lead} to Hemorrhage if
such is present. & such Hem occurs
when Vom.

Danger to Pregnant Woman causing
Abortion.

Anything interfering greatly with Sur.
may lead to Hemorrhage.

Salivary Glands. Overdose cause Bleeding.
Bad Effect of Heart

Habitual Vomiting some symptoms of
Starvation.

Increase
Motility
Hyper-
Anorexia.

1. While Pylorus open 2. Pylorus Closed.
great hunger (Bulimia)

Acrid due to Anesthesia.

Bulimia we have poor nutrition on account
of being forced into solid unprepared.

Hyperacidity

Anorexia loss of appetite.

Acrid - Hunger not satisfied.

Bulimia - Large appetite.

Pararexia - Perverted appetite.

Symptomatology of Stomach Disease

Pain, Vomiting, anorexia, pyrosis,
thirst, Nausea, Ruminations, Belching.

Hyperorexia in hyperacidity. Dilation
of Pylorus, hypersecretion.

Thirst - Nervous disorder.

Pyrosis - hyperacidity.

Stomach Cramps usually all due to gall stones.

Disease of Mouth.

Salivary glands - Non-inflammation.

Inf. abscesses. Epithelium.

Secondary infection of the mouth.

Dysphagia. Cancer of mouth.

Taste & Smell

Disturbance of sensibility, taste, & smell.

Tongue, gum, teeth, hard

or soft palate. Parosmia (objective odor)

Physiological odor. Ammonia, H₂S, Sulphide;

garlic, onions, etc.

Path. Odors. Sweet odor. Diabetes Mellitus.

Septicemia & Pyemia. Menstruation.

Specific odor. Chronic & acute Intoxication.

Bitter almond odor.

Chloroform, Ether, Bromine, Ac. Amylic

Pyruvic, Lactic Acid Catogenic.

Endogenic. Urinous odor from Chronic Neph.

Fetid odor in Diabetic Coma.

Bad odor from morbid condition.

Oral cavity, Morbid condition of Resp. Tract.

Stomach.

Gingivitis - gum.

Chronic Laryngeal Tonsillitis.

Broncho Catarrh.

Retention of food in Esophagus

Decomposing factors, Gastric ulcer

Tongue changes. Congenital.

Grayish tongue due to Leukotria.

Coated tongue. Normal to heavy smokers, excessive milk

diet, By certain drugs. Iron Bismuth Arsenic

Sulphur

Path. Whitish color tongue. Catarrh of glossitis.

Diseases of Oral Cavity. Sub

Stomach & Superacidity, gastric

asthenia. Acute & Subacute Atrophic condition

Passive dilatation of stomach Anorexia

with fermentative processes in stomach.
Center of tongue coated whitish due to
acute fibrine condition.

Strawberry tongue in ^{acute} ~~chronic~~ ^{leucorrhoea} ~~leucorrhoea~~

Longer lower last more coated tongue

Motility - Dryness

Crawling, jerking movements, unilateral
protrusion, inability to protrude.

Dryness of tongue due to Mouth bleeding
drugs, atropin, Morphine, Morphia.

profuse discharges, perspiration, Di-
phthetia, Insip. Ch. Intes. Rept.

Dry glazed tongue in Phthisis

of Brown ... acute wasting diseases.

Xerostomia - dry mouth - nervous
females. due to suppression of gland secretion.

Extensive use of normal saline solution.

teaspoonful to pint & 3 injections
per rectum

Jan. 7. 06. Topography of Chest Wall. Median. Right

Left. Sternal line, Papillary. Para Sternal.

Axillary. Ant. & Post. Axillary

Linea Costo Articularis line from Sterno Clav.
to eleventh rib.

Lung $1\frac{1}{2}$ in. above clavicle. back reaches plane
of Cervical Vertebra. Papillary line upper
border of 2nd Rib.

Mid Axillary lower margin 7 rib.

Scapular. reaches 9 rib.

Median dorsal. " 11 rib.

Sternal line 6 rib.

Kyphosis. hump on Back. Curve of front is Lordosis.

Sk. Loosis curvature to either side.

Cause of Kyphosis is senile or premature senile change
or mounds lying about spine

Chronic infection, disease may lead to Curves

1. Vert.

Corresponding Lordosis with Kyphosis is T.B.
Habitual. & Kolier's 2nd Rachitis.

Nodes on Cartilage. Reddened. Rickets.

Permanent. Bone. 25/10
also in Rachitis. Infection due to method
of lifting child.

Projecting sternum. Chicken Breast.

Pectus carinatum.

Jan. 23. '06. Gastric Decomposition.

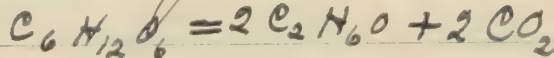
Chemical question.

1. Fermentation take place among Carbo Hydrates.
2. Putrefaction Albuminous.

1. a. Lactic acid fermentation

b. Butyric Acid ..

c. Yeast fermentation transformation of
Sugar into Ethyl Alcohol & CO_2



Saccharomyces Cerevisiae.
sugar | ferm Beer

End products of fermentation is acid

.. .. . Putrefaction .. Alkaline $\text{NH}_3, \text{H}_2\text{S}$.

a. Comes from fermentation of Milk Sugar. $\text{C}_{12}\text{H}_{22}\text{O}_{11}$ H_2O =
Lactic acid $\text{C}_3\text{H}_6\text{O}_3$

b. Comes from a.

Gas CH_4 Marsh gas inflammable.

IV. Causes.

1. Bacteria get in Stomach { 1. incompletely disinfected food.
 2. Saliva.
- Sterilize food & Mouth.

2. Secretory disturbances.

3. Motor disturbances.

4. Introduction of an already decomposed food.

III. Clinical feature Seghela.

1. Anorexia.

2. Eructation of gases.

3. Nausea.

4. Vomiting.

5. Pain { due to gas formation.
Spasm Pyloric (Pylorus)

Anti-intoxication

Hydrothronaemia. intoxication of Blood.
by. Hyposulphate.

Vertigo. Headache.

✓ Pulcations visible on chest wall.

1. Apex Beat of Heart
2. Visible Ab. Movement
3. Puls. of large Ab. Vessels. 2-4 intercostal spaces on each side.
4. Epigastric Pulsations, to left of M. line between 3rd & 4th R. Int. Cost. Rib
- Aortic Pulsations
- Liver

R. Heart Pulsations due to low position of Diaphragm, due to Emphysema Pulmonary of Med. Exp. dist. in Pleural cavity or 2, enlargement of R. Ventricle.
Aortic Pulsations as parallel with M. line Liver Pulsations in intercostal spaces.
Apex beat 5 inter spaces $\frac{1}{2}$ way between 3rd & 4th Int. Cost. Rib. Under 14 yrs. beat 4 spaces & to left. Position low down and from 2 to 7 R. 4 on R. 5 to 4 to 3. Aortic. Liver & Papillae.
May be due to change in Diaphragm as Typhoid, Abscess, Tumors.
also enlargement of heart.
Normally covers not more than tip of 2 fingers.

From Talon ^{dist} only Motor dist.

Disturbance of Gastric Secretion.

1. Physiological Remarks.

1. Stimulus for secretion.

1. Physical St. most important.
2. Nerve Stimulus (Vagus).
3. No Mechanical Stim.

Chemical Stim. - both

Raw Meat.

Water

Milk.

Gelatin.

Amylaceous food has no influence
Fat is inhibitory.

Gastric Secretion

Acid most important.

appears as Comb with Alk. Sub.

... free. 2%.

2. Increase secretory work. 3. Decrease.

1. Terminology:

Hypersecretion

(Disease ? Reichmann)

gastric catarrhea continues

Hypochylia.

Superacidity (Hypochlorhydria)

Increase Ferment. (Hyperfermentia)

Cause (for hyperchlorhydria)

Abnormal Stimuli of Vagus.

a. Abnormal condition of Vagus.

b. As a Part of Nervous System.

Reactions.

c. Gastric Ulcer.

d. Dour Catarrh.

2 Symptomatology & Sequence.

a. Subjective Sym. (aching)

Pain situated in Center of

stomach wall.

1. Long. 2. Mostly acid Secretion. 3. Spasmodic Pains.

Diminished digestion.

Acid eructation.

Vomiting.

Phacitis (Esophagitis).

Dilatation.

Inflammation.

Adhesive Ulcer.

Catarrh - surface affection of Mucosa/Muc.

Mucosa, serosa, peritoneum
surface. In stomach Mucosa is
only product. Pepsin & Gastrin is digested.

Subacidity Mucosa is clear glass.

Mucosa in Stomach is clear glass.

Diminution of Secretory Work

1. Termination

A. Reduction of Entire Secretion (achylia)

B. " " Normal Ferments (apoenzyme)

C. " " Secretion of pepsin.

Subacidity - hypochlorhydria.

Anacidity - Achlorhydria.

2 Causes

Hypochlorhydria. a. upon hereditary basis.

A. " " a. " " Nervous disturbance.

Hypochlor.: B. general diseases Acholic Stools (no Bil.).

Without fever. Blood diseases. Constitutional D.

C. Feverish diseases (infectious Dis). Aut-intoxication.

D. Catarrhal Diseases (except Soar).

achlor. Destruction of gland. tissue.

Toxic influences.

Chronic Catarrh.

3. Clinical Symptoms.

1. None at all

2. if associated with hyperkinesia.

when acid Dis is slight

Intestinal affection.

Particular in no motor Dis.

3. associated with hypokinesia.

ferm. + Putrif.

✓ Chest Wall. small protrusion.
Area is half side or whole of chest wall
is distention + retraction

1. Protrusion:

Abnormal condition of
covering of chest wall. Epidermis, Tumor of
Mammary, tumor of Clavicle (osteoma or
any other formation).

May have disturbances from within
may be between ribs or come thro
the ribs. Between ribs Hernia + Exudate
in pleural cavity.

Projection may be physiological.

(Phy. hypertrophy) ~~pharynx~~ ~~scapula~~
Emphysema most important.

Abid cond within rib: Carcinoma
Primary in Bronchi, Adenoma or
Sarcoma. Aneurysm by continuous
pressure.

Differential Diag: first by Resp. + 2nd
site. Movements.

Tumor pulsate in only one direction
while aneurysm in all directions.

On deep inspir. all tumors seemingly
disappear. & you may feel bony
outline of ribs. By pressing on tumor
you may get Cif. Disturbances.

Darkness + Cyanosis.

Projections are possible in region.

Heart from 5th to 7th left ribs & 5th to 7th
to left Pop. line are then called

Wassure may be abnormal curvature
or Enlarged Heart or Pericardial exudate.

Dif. between Enl. Ht. Exudate.

If to Heart it is to the left + you have
increase heart impulse (i.e. the Cardiac)

if no heart impulse & reaches to
right due to

Thrombosis & no impulse think of
Exudate.

Cross in R. 2 & 3 intercostal
spaces are chiefly aneurysms of Ascend
Aorta. Anteriorly & ascending Aorta
not in left. think of Aortic Aorta
A aneurysm in due to morbid
cond. of Integument. or to Physiological
or to morbid cond. below.

Just Pleura by healed up Pleur. Ex
to old dry Pleurisy. or to liquid
pleura & taking a long time & power
of Expansion lost.

May be due to Lung (Atelectasis).

Chronic Esthesis. R. P. B. on acct
of Pleuritis Effusions.

Most lower down are due to

Distentions.

due to Pneumothorax

Pleuro Exudate.

Loss of Lung Elasticity. or Emphysema
jessie's

Submotility Term, Small Int., Cause

- 1, With Impediment in Pylorus. 2, With no impediment.
- Peristalsis Excessive or inadequate / gastro-intestinal.
- 2, a. Longitudinal Weakness. (Gastro-intestinal)
- b. Obstruction in position. Enteroptosis of P.
- c. Inadequate tone. Gastric atony
- d. Chronic atony. Hypotonic
- e. Chronic atony. Nephros
- f. Anterior depression of pylorus. Cole
- g. Inadequate tone.

Small Int.

- a. Decomposition
- b. Dilatation

I General Clinical Features.

II General Therapeutics.

I a. Gastric symptoms.

- b. Intestinal "
- c. Disturbance in nutrition.
- d. " " " " " " " " " " " "
- e. " " " " " " " " " " " "
- f. " " " " " " " " " " " "

II. 1. Prophylaxis

2. Diet Therapy

- a. general - excessive
- b. Excessive Excessive
- c. Motor " (Overexertion).

D. Excessive Excessive

3. Pharmacotherapy

- a. acid value.
- b. Medicine Excessive Excessive
- c. " " " " " " " " " " " "
- d. " " " " " " " " " " " "

4. Physical Therapy.

1. Lavage.

2. Hydro pathic procedure.

3. Electricity.

4. Massage.

5. Operative Indications.

Theapeutics of Stomach Diseases.
Prophylaxis.Dietetics: Mech. Chem. Therap.
diminution in amib. avoid hot & Cold.
proper quality.

Chem:

Dietetic proper.

30 grams (about 1 lb.)

1 cup water.

30 gr. (1 lb.) 1/2 to 2 lb. free HCl.

Alumin increases acid. give rest.
too HCl. gas fat. decreased acid secretion.
too hypo. Binds in / function activity.
1. Alkali, acid. & Auto Hydrochloric acid
10 drops in water even higher
at 4 to 5 are taken.

1/2 lb meat 100 drops HCl. are necessary.

alkali. Magnesia usta.

Bismuth Sul nitrate. 15 gr.

May form gases. & acts as stimulus

Secretions increasing & decreasing.

Atropia Sulp. inhibits for time short.

Pilocarpus Hydroch. increases secretion 1/2 to 1/10.

Hyoscinum Hydrobromatum gr. 1/100 to 1/500.

Increases HCl. for Nervous troubles.

Disinfecting Drugs. Cleanliness of Mouth.

Many patients of Acute Fetile Diseases die from
secondary infection thro' mouth.Salicylic acid. R. Acid Carbolic 1/2 gr. XX
aq Chloroform. 1/2 lb.

May add case. Sepsis & not

Stomach Tube. to use in Stomach.

Do for special purposes.

Nitrate of silver. Subnitrate of Bismuth.
introduced 1 to 2% of white silver, 1 pt. in 100.
use 1, 2, to 5 min & draw out.

R Argut Nitric grs. IV.

Ag. Nit. 3 iii.

Greenin 3 i.

M. D. D. vitreum caeruleum.

Sig. Tribespongia ^(vitreum) ~~de~~ ^{re} ~~caeruleum~~
given from glass.

R Argut Nitric grs. XV

Holus abai grs.

Pills 2/10 100.

Bismuth sub-nitrate covers ulcer & allows
food pass over without pain. in 30 gr. dos.
powder suspended in water before meals.

Physical Methods

1. Stomach Tube.

2. External Hydropath Treatment.

1. Cold packs.

3. Massage. Left to Right.

4. Electricity.

5. Operative Treatment.

1. Stomach Tube. Contra-indications:

affections (certain) of esophagus.

acute esophagitis & venous dilatations.

from serosis of Liver thru disturbance of Portal Cir.
Affections of Heart & Pericard.

Cardiac end of junction. S. Small. S. Small.
 Pyloric level of end of junction on a level
 with Pyloric level. Pyloric space. 1/2 inch. S. Small.
 when collapsed. S. Small. S. Small.

Below is depression than protrusion.

Protrusion may be due to air or gas.
 but usually by stomach distended with gases.
 Sinking may be due to shrinkage of stomach
 or misplaced stomach.

Gastroctasia: disturbed motility.

Gastroctasia lighting the stomach.

Full stomach with P. Small. S. Small. S. Small.

Pyloric: sensitive to pressure.

2 in from spine. P. Small. S. Small. S. Small.

Stomach pain. S. Small. S. Small. S. Small.

Stomach pain.

Resistant. Pyloric. S. Small. S. Small. S. Small.

Stomach pain. S. Small. S. Small. S. Small.

Stomach pain. S. Small. S. Small. S. Small.

Stomach pain. S. Small. S. Small. S. Small.

Stomach pain. S. Small. S. Small. S. Small.

Stomach pain. S. Small. S. Small. S. Small.

Chemistry. Alkaloid.

1. Strychnine. $K_2CrO_4 + H_2SO_4$. Crystal. $HNO_3 \rightarrow$ yellow. Marguis Reag.

2. Caffeine - alk. not typical. Purin Ring. $\begin{matrix} \text{N} & \text{C} & \text{C} & \text{N} \\ | & | & | & | \\ \text{C} & - & \text{C} & - & \text{C} \\ | & | & | & | \\ \text{C} & - & \text{C} & - & \text{C} \end{matrix}$ Xanthin.

Xanthin decomposition products of Proteids. $\text{Coff} + HNO_3 = \text{yellow} + \text{amr} = \text{orange}$. (Xantho-Proteic?).

Coff sol. in water. Theobromin not. Theobromin - Sod. Sal (Diuretic).

3. Pepsin - Nitral Principle

4. Morphine - alk. - Codein, Narsin. Narsin, paparin, Thebain. from Opium.

Artificial alk. Heroin - Dionin - Peroin - 1. Diacetyl. 2. Ethyl. "Nethol".

Tests: for Meconic acid. Marguis (20cc H_2SO_4 , 1cc HNO_3) play color.

(HNO_3 + heat orange color).

5. Cocain. alk. decomposed on heating. Ecain. Synthetic. Stovain. Anylin.

Holocain. Heat + alc + $H_2SO_4 \rightarrow$ Emity odors of methylbenzoate.

Organic Functional Diseases.

1. Cataract { ^{infect.}
 { ^{trauma.}

Acute gastritis.

Pain. Vomiting. 1. Stomach. abd. 2. Es. etc. (gallbl.).

3. Physics. (Colonel).

2. Cancer: ^{cardia.} fundus. 72% Pain.
 ^{smaller end.} pyloric end. 22% Vomiting.

a. Tumor belonging to Stomach

B. Cachexia =

C. absence of HCl.

Cardia: gastrotony

Pylorus: Gastro-pyloric tone.

Abdominal pain restricted v. massive. etc. & diff.

b. Atropin: Hyocyamin. isomeric. Scopolamin + Atrosin isomers.
Hyoscin.

General Symptomatology of Liver Disease.

1. Change in Org. of the

1. Size, consistency, shape, surface. Pain.

2. Icterus ... asides.

4. Hepatomegaly.

(Detailed Vins)

Bilirubin.

Lionel Biale

Oct. 8. 06

Struma, Goiter.

Parenchymatosa.

Struma mostly Bilateral. Thyroiditis is painful.

Carcinoma is Hard resistance. Cyt. is smooth

soft, fluctuating. Surgical for cyt. Tr. of 20.

Yastradenia

Nov. 12. 06.

Alb in urine & Dropsical Cond. 1827 Bright Disease.

Passive Hyperemia. Cyanotic Kidney.

Acute Par. of Secreting cells.

Chronic.

Amyloid Kidney.

Treatment of any infectious disease.

a. Prophylactics.

1. Quarantine

a. National: Immigration -

Coast: Inspection of Steamships etc.
Inspection of all products of food

b. Civic: Inspection of all immigration trains etc.

c. Certainty of infection

2. Isolation: until not transmissible

3. Personal: ~~isolation~~ all exertion & everything in contact with R.
Disinfection

Room: fumigating. marked with kieselguide
with chemicals. fumigation.

1 pint 40% formalin (100 grs. per 24 hrs.)
43 Potassium permang.

Sulphur formulae. ammonia will
clear this up.

Body: wrap in kieselguide sheet. Sealed off. Bury.

4. Civic:

Legal. special laws & requirements.

Report of all infectious & Road of Health
individual inspection: investigations
of all infectious diseases

Free Clinics. Sanitoria.

General Sanitation: water food supply. sewage disposal
Mosquitoes. rainwater cisterns

5. State: Inspection of food stuffs.

Sanitorium (I.R.C.)

6. National: Inspection of food & immigration.

B. Specific

Drug

Serum. vaccination

C. Active

Prophylaxis. lightness. Remove all unnecessary furniture
spaced. Mattress covered by rubber sheet. Clean sheets

Personal: Clean night shirt. Clean bed dress daily. Clean feet
Daily bath alcohol. mouth wash. etc.

convalescence, wheel chair etc.

Dr. Lunt.

© 7 Medical.

1 Spinal.

2 General.

3 Spinal.

4 Diplomatic.

A Parasite is a small organism which has habitation on stronger .. & feeds on weak.

Animals

Entozoa

1. Temporary - Leech.
2. Permanent - Tapeworm.

Ecto parasite. Cling to surface - Leech.

Ento parasite. Internal. - Malaria - Tapeworm.

Leech fastens on ff sucker at each end of Body. recognizes host when in water by sensation's & waves. gets food from smaller creatures.

Tapeworm is true Parasite, poor sense, no eyes, ears, has no Alimentary Canals. get nourishment by absorption. Has habitat in Chyle, must have head & suckers. enable it to maintain position. must have continuous production of cells or segments. & these segments produce eggs. these eggs are produced to spread disease as action is passive.

These eggs are taken by Hogs & in bag they pass thro Intestines walk & arrives in Muscles & get back to man.

Hosts. Temporary
Definitive

Groups of Animal King

Protozoa / celled animals Malaria -

Metazoa tissue producing animals

Porifera

Coelenterates

Ctenophores

Urmes

Arthropods.

Mollusca.

Protochordates.

Chordates - Vertebrates.

are primitive reason: low organization.

Proteus Amoeba.

1. Rhizopods. Amoeba. Most important. Most important.

2. Flagellata. Amoeba. Most important.

3. Sporozoa. Amoeba. Most important.

Amoeba. Most important. Amoeba. Most important. Amoeba. Most important.

Division. By budding. Amoeba. Most important.

Microgametes. Sexual generation. Amoeba. Most important.

Macro. Egg. Amoeba. Most important.

4. Infusoria. Amoeba. Most important.

Large cilia around mouth to take

food as permanent anus.

Amoeba. Most important. Amoeba. Most important.

Rhizopods.

Amoeba. Most important. Amoeba. Most important.

Produce a form of dysentery.

Amoeba. Most important. Amoeba. Most important.

Amoeba. Most important. Amoeba. Most important.

When outside thick capsule forms. Amoeba. Most important.

Highly resistant. Amoeba. Most important.

Dysentery. Amoeba. Most important. Amoeba. Most important.

Amoeba. Most important. Amoeba. Most important.

Amoeba. Most important. Amoeba. Most important.

Amoeba. Most important. Amoeba. Most important.

Amoeba. Most important. Amoeba. Most important.

Amoeba. Most important. Amoeba. Most important.

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Amoeba. Most important. Amoeba. Most important.

Amoeba. Most important. Amoeba. Most important.


Amoeba. Most important. Amoeba. Most important.


Amoeba. Most important. Amoeba. Most important.



Amoeba. Most important. Amoeba. Most important.

Flagellates very numerous & important.

Trichomonas vaginalis young & old just Menopause
not important.

 10 to 15 μ 7 to 10 broad. form varies.
Lambliar found in intestine
intestinalis

 Cup shape body fits on epithelial cells.
transmitted thus feces.

I Trypanosomidae.  phagocyt. drinks food
Trypanosoma flagella is vibrating
body.
S. Spirochaeta.  faintly

Trypanosoma, parasite in Blood of many
of animals.

B. Spirochaeta Pallida - Syphilis.

" Clamneri - Relapsing fever.

may have long axial nucleus?

A. Trypanosoma, Division Longitudinally
New membrane formed produce flagella
In Rat may be 1 μ - 60 μ .

1. Trypanosoma lewisi found in blood
of Rat about 25% rare in white rats & tame rats.
observed 1845. Lewis 1877.

Morphology length 8 to 30 μ width 2 to 3 μ .

Protoplasm granular granules related to division.
flagellum single long as body, large oval nucleus.
Rapidly motile. Keep alive longer in cold.
requires oxygen & show effects of septic conditions.
Nucleus Reticular.

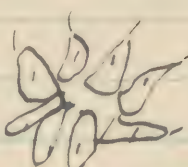
Blood free from infection will inoculate Rat.
Serum will produce active & passive immunity
Agglutinate in Rosette form when in Serum.
Serum produces great activity of Leucocytes?
they act. grow on Agar + 10% Normal
Na Carbonate Sol. cook to 50° add 2 volumes
Rabbit Blood.

Dec. 13, 05.

Trypanosomes. - Divide rapidly.

Binary - one becomes two.

Rosette - multiple division

Agglutinate in Rosette form. 

Disease in Domestic Animals in Southern tropics S.A. etc.

Surra - Horse Disease in India & Philippines
Tr. Evansi.

Nagana - S. Africa - Tr. Brucei, not sheep or goats.

Dourine H. Europe Tr. Equisetum.

Mal de coit

Mal de Caderas. S.A. Tr. Equinum.

Brucei 5 to 7 μ

Surra - general similitude in all cases.
variable incubation period. rise of Temp.
stupid, watery discharge nose & mouth.

Hair falls out. marked emaciation.

Adema of parts genital, gail staggering.

Skin Eruption, Parasites found not always
in blood

autopsy Enlarg Spleen, gelatinous material in adipose

Serious Exudate Edematous condition

Don't know if Recovers in Horses & Mules.

No toxin has been found.

No evidence of Tr. getting into mouth.

Must be conveyed by blood suckers.

Quite a number of flies contain Trypanosomes.

Tsetse fly which affects.

Glossina morsitans.

Rats get it thro flies or lice.

Tr. does not change or develop while in flies.

Tr. live for about 48 hrs. on the flies.

Dogs & cats when inoculated are susceptible.

In culture 23 subcultures 3d. & they

are useless on cultivation.

Treatment not successful.

Spirochaete Pallida Schaudinn 1904, p. 55.
found in *Parvulus* & *Secord*. Hoffman, - -
but not yet infectious. (Giemsa stain)
+ 0.10 μ long. found in *chance*. lymph
glands.

Sp. Refractive found *Extremal* lesion.
+ non epithelial lesions.

Class III

Sporozoa. spore producing animals.
all parasitic. intracellular parasites.
at some stage, some ultimate.

Order I. Gregarinida - Not human. Parasites.

" 2. Coccidida - Rarely " "

* " 3. Sarcosporida - Often " "

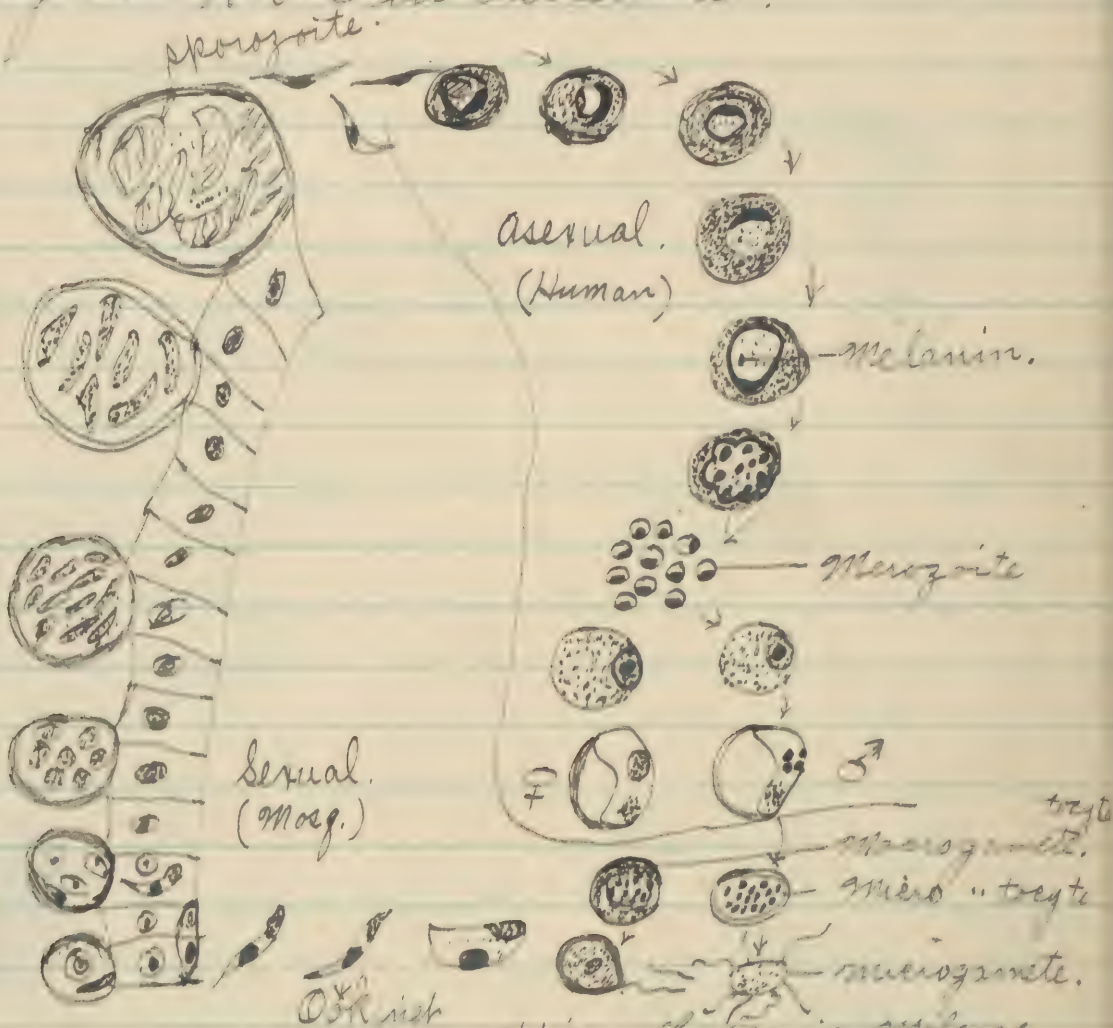
" 4. Isosporida - Rarely " "

" 5. Microsporida - None " Lishes.

Coccidium Curisula in Rabbits.



Dec. 20, '08 *Coccidium hominis* about same as in rabbit.
Haemosporidia: Blood Parasite, all
Vertebrates except fishes.
Always in R.B.C. in Vertebrate.



Malaria: Tertian: *Plasmodium vivax*.
Quartan: *Plasmodium malar.*
Tertio Autumnal: *Plasmodium praecox*.

Paroxysm when Merozoites are released.

Ross - Mosquito cycle.

Plasmodium cysts filled with Sporozoite.

Break out & get into salivary glands of Mosquito

Alcohol, Pigment collected, enter Sp.

Anopheles Mosquito.

Culex Birds.

Intermediate host. has asexual stage of Parasite.
Infinitive " " Sexual.
Mosquito is Infinitive host for Malaria.

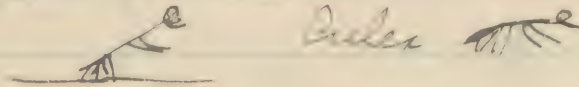
Tertian 12-20

quartan 9-12

W. & S. autumnal. 10-12 pigment scant & heaped in one spot.

Tertian - Sexual differentiation after 3 procytes.

Anopheles stands on head



Culex



Anoph. maculipennis
punctipennis. mottled wings.

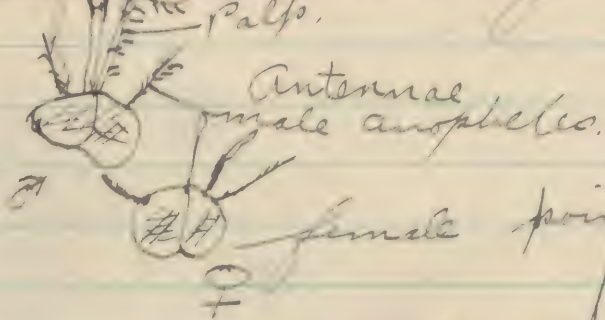
Stegomyia fasciata

Anopheles & Culex in all parts of world.

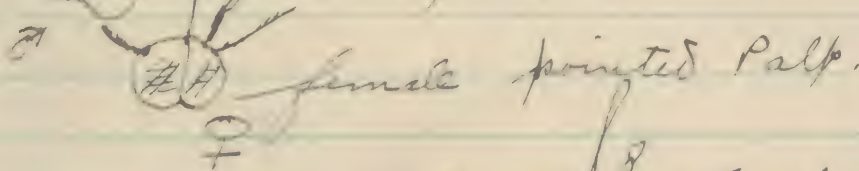
Malaria absent account of cold

Mosquitoes not even being infected.

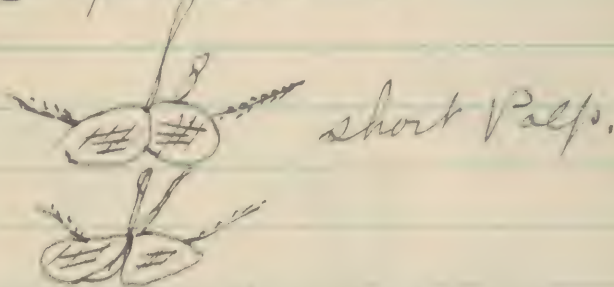
Palps.



Antennae
male anopheles.



female Culex



short Palps.

Male Culex

Prophylactic. 1. Destroy Mosquitoes, 2. Destroy disease in man, 3. Drainage of Sloughs, 4. Oil on states to prevent breeding.

Duckweed (Lemna). few mosquitoes are found.

Piroplasma

Bovine piroplasmosis. (Texas Fever).

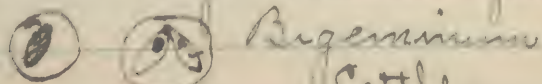
Ovine " " Sheep.

Canine " " Dogs. Europe

Equine " " Horses. Africa

Human " " Rocky Mts.

Bovine high continuous fever. 100°. Dim. in B.M.C.



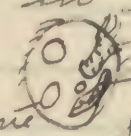
Bergmann's

Cattle,

Ameloid.

7,000,000 to 2,000,000.

Human. Western Mont. 126 cases 5 '03.
 70 to 80% fatal. Organism in blood
 In Wood tick bite. one side of stream.
 Hyacinth. Quinine.

Vermes. Infusoria - appear in infusion.
 Jan. 8 '06. 1. Balantidium Coli  Peristome
 vacuoles contain some food.

Cilia all over large at mouth
 Reproduce by constriction in middle
 Appears in swine intestine & sometimes
 in man 117 cases in 2 years 35 fatal
 ulcers in intestines. Chronic Disease
 characterized by diarrhea. Come from
 Northern Europe.

Mode of infection direct as using intestines
 of Hog. May infect itself.

2. Plathelminth = Flat Worms.
 Solid mass parenchyma.

Class. Tubellaria - in water lamp, places not deep

" 3. Trematode - Flukes

" c Cestodes -

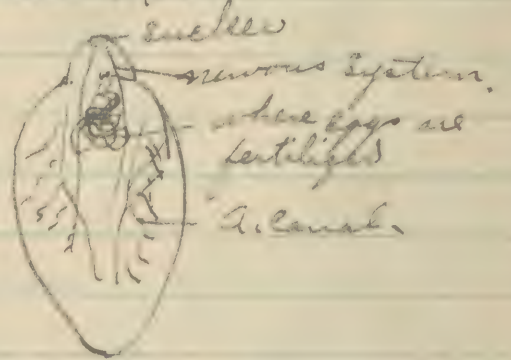
Fluke Livers of sheep. Livers Rab.


Distomum Hepaticum

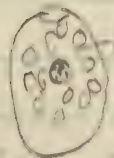
Tasciola

fastens by sucker & kills Duck

smooth surface



 alimentary canal

 Egg Trematodes.

organism has both
 male & female genital

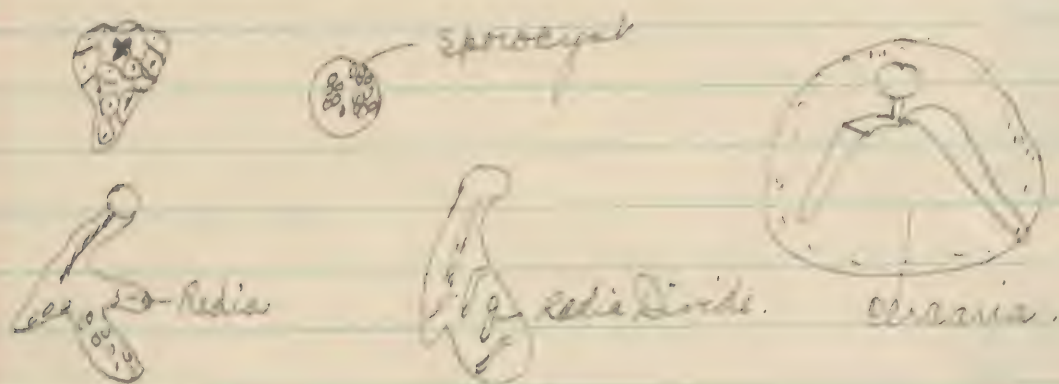
Eggs pass from sheep may fall in water & the
 egg shell ruptures & Miracidium escapes & swims
 about in water & gets into breathing apparatus
 of snail & there forms a cyst

Spore cyst contains Germ Ball. Redia forms &
 multiplies & snail becomes infected

Occur in have tail to swim makes its way out of snail & get on grass blades & sheep eat grass. it is protected by cyst wall in stomach & get to bile duct.

Occurs in nearly all herbivorous animals, occasionally in man.

Path. F. Livers obstruct B. Duct & cause L. P. H.



Jan. 10, 16.

Chistosomum Haematobium.

Bilharzia - 1852.

Disease in Africa lives in Portal Vein.

Bladder affected, Catarrh

Kid. Inter Nephritis.

Native of Lower Egypt. 30% affected. Eggs cause most trouble cause stone in bladder.

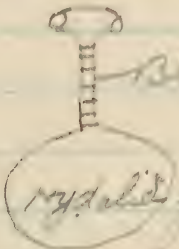
Has wide distribution Arabia to Cape Colony.

15 M.M. ~~with~~ 9 suckers. body covered with warts & prickles female more slender.

20 M.M. long. 2 Alimentary canals which come together behind suckers. female has ovaries & yolk. Eggs pass out in urine & get in water.



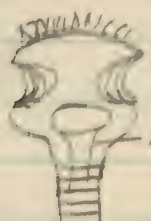
Cestodes. Bothriocephalus latus. in side
30 ft long. two suckers on head. segmented
animal. compound. These portions which
get into system. six hooked larvae
gets into muscle of animal from intestines



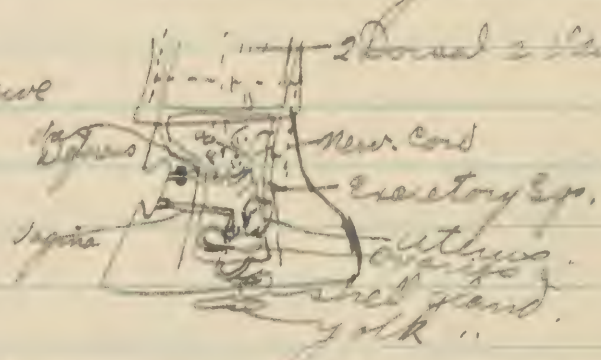
Bladder worm. with which pork is infected
Alteration of Generations.

Proglottis discharged by feces
Taenia Solium. & gets into hog.

Each joint is independent.
Scolex - (head) has hooks or suckers.

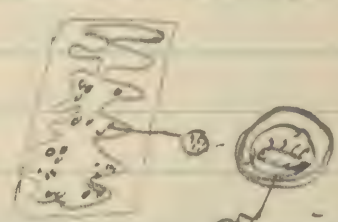


Uterus cavity in Pseudocyst



Eggs fertilized & pass to uterus & other sex
organs atrophy

Taenia Solium is slender.



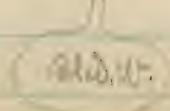
Both. Latus retains segments
& throws out eggs. Rings get into water &
in fish.

Jan. 19, 00

asked in system - Beef. has no holes
Proglottis are very active. Uterus - smaller
but numerous.

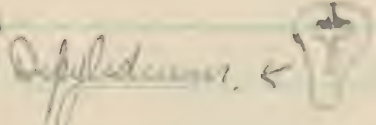
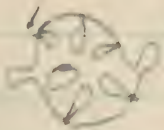
Taenia Solium - a thin, long, the body.
Each of eggs contains Bladder worm. (Cysticercus
cellulosa) (P. is Cysticercus Bovis) in hog
is in the muscle 20-30 mm. long & white of the

In stomach head & part of
neck remain



Cys. Bovis from muscle of cow mostly
 Pongletides setus - found in muscle of cow
 of blades of grass & bit of soil in garden
 Dipylidium Canine. Dogs sometimes in Chelms
 get in dog house & house is infected & get
 black in dogs by their eating

I am small intestine of Dogs (T. Echinococcus
 22 mm. long. Ech. stage in Domestic
 animals & not uncommon in cattle
 giving sp. 10. Brood sacs may be large as
 an orange mostly in Echinococcus -



Jan. 17, '90.

Nematodes.

Trichinae

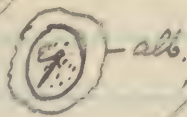
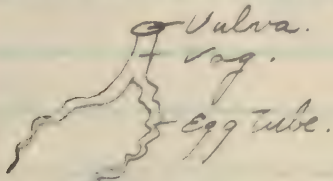
Filaria.

Uncinariasis - worm in intestine sucks blood
 in Poor whites of South.

Ascaris lumbricoides small intestines of man
 & mostly children. Common in Finland & Holland.
 Seres mostly distinct in nematodes.

Not so large in man 20 to 40 c.m.

Spicules sharp hook shaped on tail end this
 tail hooks around female.



Pass out with feces.

70 to 50 μ .
 50 to 40 μ .

Must be kept in moist place 2 or 3 months
 & can then be inoculated.

Four long & cylindrical. genital opening on lateral
 side mouth is Terminal

Straight Alimentary Canal. triangular liver
 Body covered with thick cuticle

Excretory system opens near mouth.

Nerve ring surrounds Esophagus near front.

and four nerve bands run back. connected
by commissures

Oxyuris Vermicularis limited to children.
female 1.5 M.M. Male .850 M.M.

Mouth terminal
Simple Alimentary Canal

live in large intestine. produce irritation.
Crawl out of anus at night may get
in vulva. Egg may get on finger & into
mouth. May occur in large numbers.

Family

1. Ascaridae

Genus *ascaris*. 250 Species.

.. *Oxyuris*.

2. Filariidae - *Trichinella* - *Filaria* -

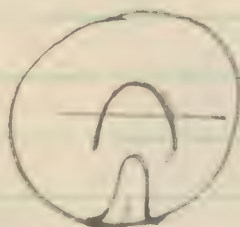
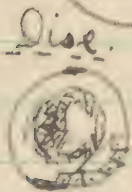
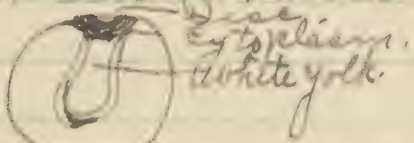
3. Strongylidae - *Uncinaria*.

Feb. 1206. Starfish ovum.: Holoblastic seg - equal. Dis.
 Meroblastic seg.

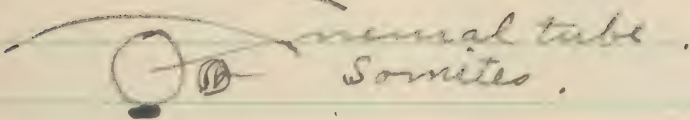
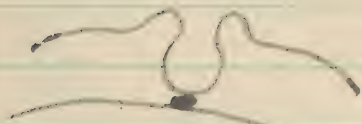
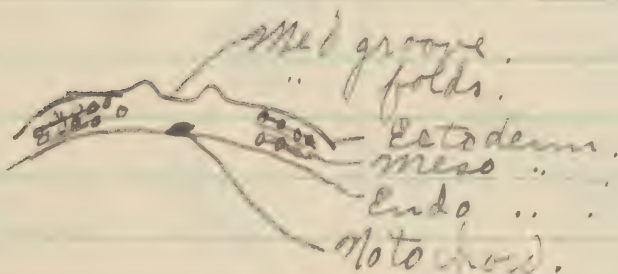
Discoidal.

Development of Chick.

1. Shell two parts.
2. .. Membrane. two layers. Air chamber between.
3. Transparent part. Chalaza from ends to y.
4. Yolk. in membrane.



Primitive Streak.



Somatopleura. Splanopleura.
 Amnion formed from Somatopleura piling over
 Embryo

Cytomorphosis.

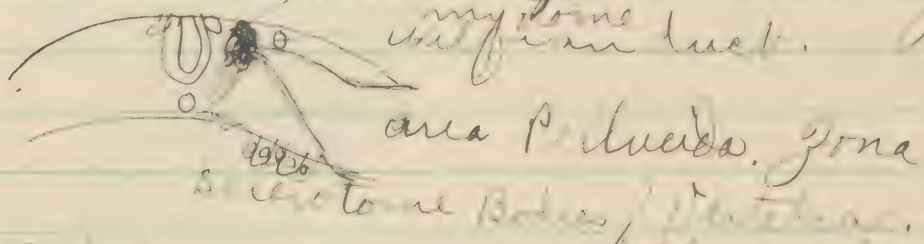
1. Undifferentiated Cells
2. Progressive Differentiation.
3. Regression ..
4. Dist. Death ..

Law of unequal growth.

Histogenesis of formation of tissues

Organs
 Epidermis, Nervous system. &c

first sp. N. 2nd Div. of Krain. 2 sense organs
muscle plate - into layers of minute
myofibrils.



Endoderm + Mesod. Epithelial layer.

Bli. Der. framed.

L. atus Cuvieris.

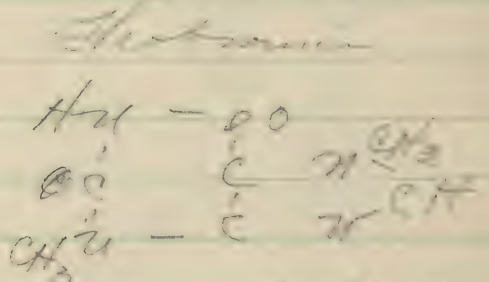
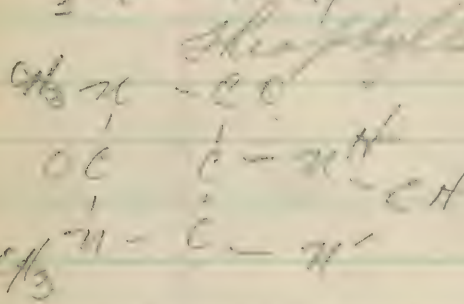
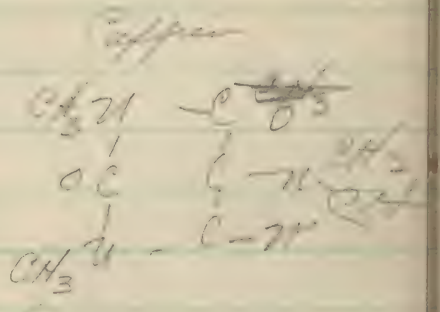
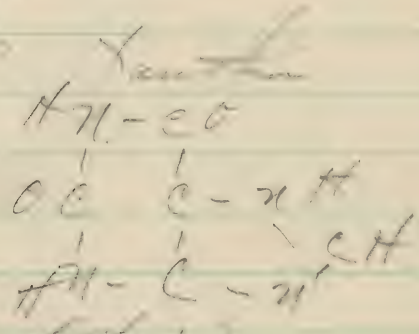
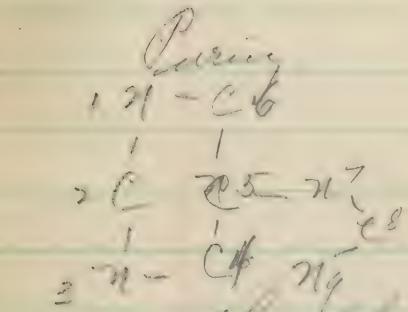
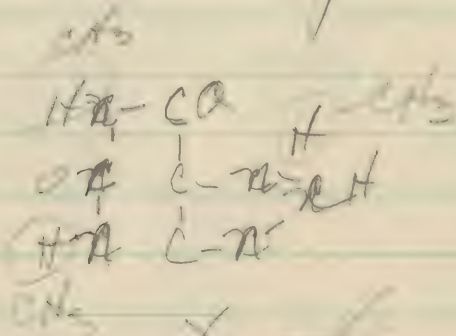
Mesoderm.

Endoderm also enveloped. Epi. of Digestive
tube: Lung, Liver, Pancreas.

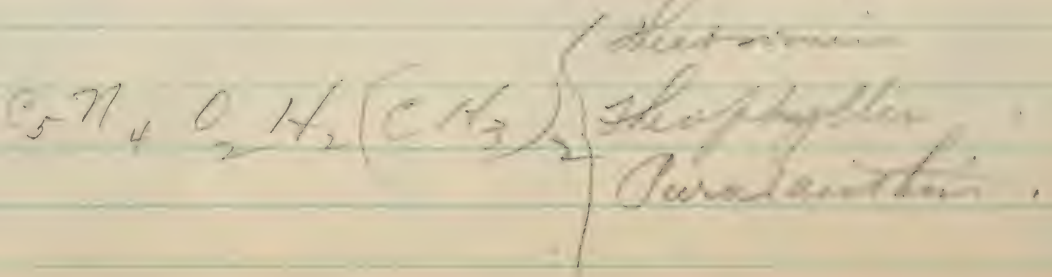
H. to cor.

Mesoderm: Supporting tissue / Bone.

Blood + Vascular System + G.U. System.



Reptiles = Xanthine base for proteins



Dr Nicholson

Oct. 18, '06

Wounds of Abdomen: { Non Penetrating.
Penetrating.
Non Penetrating diag easily made. Inspection & touch.
Small wound should be enlarged. Keep clean & close large wound. Penetrating Wound. do not insert finger or probe. Normal Saline Sol. Punctured gunshot.
Stab. Ascertain condition of viscera Prog. depends on this.
Existence of air not dependent. Explore wound by careful dissection. Incise above & below.

1. General & Local symptoms } Dif. in Pen & Nonpen.
1. Vomiting may be result of injury blood indicative } Stomach
2. Pallor may come from shock.
3. Pain not important in differentiating. 4. Pulse
5. Hemorrhage. large amts in abd. usually an aching weak. fast pulse Air hunger when much hemorrhage takes place. Operate in hemorrhage & where contents of Bowel escape.
- Lembert, ^{Perforating} Holstead Sutures 4 or 5 to inch. Examine viscera in line of injury. Murphy's Button.
- Compress Ab. ~~press~~ Porta to find place of hemorrhage.
- Handling intestines causes shock.

Oct. 22, '06.

Ulcer of Stomach. & Duodenum
Necrosis of wall probably cause of local origin funnel shape. ^{funnel shaped} most often in Lesser Cur & Pyloric orifices Young Women. Sym. Pain. air area of tenderness & vomiting blood vomit blood without Cer diag positive. Ant wall may perforate. Post Wall. Catarrh. Previous } Supposed Dyspepsia for months. Surgery advisable after more than one hemorrhage of considerable amt. & recurring. If in Post wall open ant. wall. Lembert Sutures on Post wall. Mortality May have stenosis. Cicatricial not common result of destruction of Mucous Membr.

Oct. 28, '06.

Abdominal covered or partially by Peritoneum.

Dec. 17, '06

gallstones usually preceded by inflammation & infection. Long jaundice may have hemorrhage on splenation need of coagulation. Test coagulability prior. More than 5 min. contraindicated.
Chloride of Calcium 1 gr. & 30. for gelatin.
Cholecystotomy indicated.

small incision parallel to ribs. As of 10 day signs
Stones in duct more serious.

Stomach: foreign bodies may cause symptoms
resembling Gallus Cris. Peristalsis the same.
Use Bragg. Give food which form a bolus. potatoes
etc. don't give purgatives.

Jan. 7. '07. Ulcers: Anaemia. Syph. ale. Embolism. Acidity
Burns / Skin. cause.

Excess HCl. Blood Brighter red. Anemia some
loss of flesh. Nausea. Pain. Vomiting.

Keep Patient in bed & use Rectal feeding.

Large doses of Bismuth 60 to 120.

Nitrate / Silver is good. Carbolic Acid 2 drops 3x a day
Laparotomy. Gastropexy. attach center of ant
Body of Stomach to body wall.

For dilated stomach attach Post & ant. Wall
& push in Lesser curvature.

Double stomach. may remove one or fold one
upon other & make opening between.

~~Cancer Stomach~~ / Carcinoma produces atrophy of S.
& dilatation of Esophagus. food retained in
Esophagus may become enormous.

Should be recognized early. Hypertrophic sym.
Pain over 40 yrs. is suspicious.
Age after 40. 2. Pain. 3. Anemia loss flesh.

* Haemov. Vomiting. Tumor not so important.

Decreased Mobility HCl. free is absent.

If Lymphatics are involved don't bother stomach
May grow away from Lumen. Radical early
before Carcinoma & other parts involved.

Next to Uterus most frequent for Primary.

1. Cylindric Cell. 2. Encephaloid & scirrhous & colloid.
2. Rapidly destructive. substance like Brain substance.

Jan. 14. '07. Gastritis 90% irreducible contain omentum.

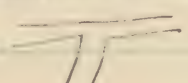
Inflam trouble, ant. walling, - and may
be caused by escape of contents from Bowel.

Incarcerated, obstructive, obstructions Bowel

May not be complete. Causes digestive disturbances
 Strangulated also affects circulation. may
 perforate. Toxaemia causes death. General
 signs. Pain. Prostration. High temp. Vomiting.
 Higher up when vomiting. May have gas &
 frequent small stools. Reflex Peristalsis.
 Inguinal 80% / Hernias. Oblique 90%
 Direct is mostly Bubonicele.

Infantile 40% cured by operation.

Soft pad is better. Richter's  ?

Littre's Hernia  is a diverticulum.

12 Blank Leaves Not Scanned

Fibrous Bronchitis

95 have Bronchioles covered with fibrin & when loose are pulled up & expectorated. found in people of Indian tendency. found with some skin diseases.

Between ages 20 & 40

Most frequent in Spring & fall

Symptoms: Commenced with chill, sharp coughs up. Continued filling in chest interstices with mucus.

Bronchial casts are distributed quite general.

Treatment: is to try to remove casts.

Inhalo - warm steam give Pilocarpine may cause them in mucous.

Do. of Soda good for Permanent treatment.

Congestion of Lung - Active + Passive -

Active Congestion congested Absolute air vessels - increase in temperature.

Preceded by Chill

Sudden exposure to intense cold.

Passive Congestion - Weakening of Drain

Mitral Insufficiency mechanical form. Pulmonary Hemorrhage.

May be capillaries small & dying from a number, or bursting & large.

Pul. apoplexy due to ischaemia & breaking into interstices of lungs. is rare.

Spitting of Blood is indicative of T.B.

May be in Healthy person.

T.B. is frequent.

Blood is dead when vomited

" " Alkaline vom Muc. Phlegm Lung etc.

" from Auricular expectoration continues for several days - serious -

Bronchial Ragia indication of Pneumonia.

Cancer of lung may cause breaking.
 Bronchoectatic Dilation of Bronchial tube
 may cause small arteries to give way.
 Hemorrhage may take place from above.
 Heart Disease - most frequent is Mitral
 Disease.

Vitrious Hemorrhage, where disturbance of
 menstrual flow.

Japan & China due to Worm in Bronch.
 tubes. Distome Linguae

When due to TB. usually takes place
 at night.

Diaphoreses. New Bacteriophage not given
 Keep quiet. Ergot Adrenalin.
 Ergot + Opium.

Pneumonia. Infectious Disease. Lobar. Bronchopneumonia
 Pneumonitis, Bacterial.

Runs a course termination in crisis.

Terminates when enough antitoxin is formed
 to counteract disease.

Serum does little good.

Due to *Diploa pneumoniae* Pneumonia of Hens.
 found in 20% of healthy people.

Vitality should be lowered.

Wide spread. Dudden changes favorable.

Fall & Spring best time. Most frequent acute Dis
 ease 20 to 30 in 1000. Violent exposure.

Males more frequently. Fatal after 50 yrs.

Debility & is Secondary to Bright's, etc.

Once I had is more likely to develop.

immune for about 6 months.

Epidemic in certain localities, or in houses.

Affects other organs. may be a cause of Pericarditis

When apex Press. may have a Murmur.

More frequent in Endocarditis. more in heart
 Rheumatism.

3 Stages. Stage 1 Red Hepatization 1st Engorgement
Gray

May have violent hemorrhage in Engorgement
Stage 2 Pulmonary circulation increased
lasts 24 to 36 hrs. 3rd Period Engorgement
Hepatisation in Engorgement Stage.

Capillaries swollen, fibrin in air cells is
semiliquid

Red Hep. fibrin fills air vesicles & bronchial
tubes, has granular appearance.

Certain cells are slower to be involved & there
is where there is asperities when lung
becomes solid we have Bronch. Breathing
Alveolar walls are infiltrated leucocytes
are found in interlobular tissue &
there is approaching?

Gray Hep. comes after acute. Liver has
enlarged. Leucocytes & gradual softening
Leucocytes aid in clearing up & looks
like Purulent Secretion. This is

called Resolution. When this process
is retarded small abscess forms
or another termination is interstitial
development of fibrous tissue & this
destruction function of these cells

R. Lung is more frequently involved than L. Lung.
5/6 32% 16%

Symptoms ushered in by chill lasting 20 min to hr.
commences abruptly, fever rises rapidly to 104° F.
after chill stage commences, dry cough.

Pain on Side where pain is located usually upper
may be referred to abdominal region. Grunting with
cough. Cheeks red, Eyes Bright. Respiration increased
& is an effort, may hear Crepitant Rales.

BronchoVascular Manner over inflamed part.

16 - 72

45 - 100 favorable Prog.

60 - 110 unfavorable Prog.

Expectorate Mucous tinged with Blood
later Rusty color Sputum Pathognomonic.
Old People & insane do not always have these
signs.

Second Stage - early we have Crepitant Rales made
by Inflamm. products thrown into Air Vesicles.
Later material has filled air vesicles & such
is not heard then late stage is consolidation
& Dull percussion & Bronchial Respiration.
If Expiratory Bronch or Chest Voice is heard
as Dis progresses Symptoms increase
Delirium, Leucocytes, high colored urine,
Increase Uric Acid.

Pseudo Crises Temp drops & Patient seems
to be improved & after symptoms are more serious
7 or 8 days have true crisis Antitoxin has
been developed which counteract the toxins of B. pneumoniae
Heart should be examined frequently.

Second Pul. Sound is under to lesser extent

R. Side is Dilated & interferes with
Cyanosis appears. Sound is Muffled.

Prognosis grave in old people. Not bad in children & healthy
adults.

Don't rely too much on treatment, most times are over-
medicated. Pneumonia with Meningitis fatal.

Meningitis most apt when upper lobes are involved.

Endocarditis interferes with recovery. Pericarditis not so serious
Pleuritis nearly always involved.

Great deal depends on the heart.

When Pulmonary second sound is dull there is
increase in B. & may lead to Muffled sound.
Brachycardia. Progresses to strain on R. Ventricle.

Toxins bad effect on Heart & muscle cause of Delirium.

Treatment. Self limited Quinine not large dose 3 grs. 3 or 4 times.

Revive Digitalis for Extreme Measure.

Strychnine acts as tonic without increasing contraction.
A valuable remedy when heart shows weakness.

Alcohol - Whisky Brandy are Best.

Don't use Opium. Sulphuric. Bromide of Soda to
allay Nervous Debility.

Fibroid
Phthisis

Interstitial Pneumonia:

Phthisis means wasting, or contraction
Unilateral disease, condition where
fibrous tissue takes place of the normal.
Are but about by various conditions.

Septa & Alveolar walls, & Pleural
extensions, & Interlobular tissues.

Local & Diffuse form.

Tubercular invasion has some local.

Fibroid tissue in walling in foci.

Adhesions of Lung, Gummata etc have some
local conditions that is substitution of
Normal by fibroid tissue.

Diffuse variety cause is a sequence

1. Acute fibrinous Pneumonia when
there is failure of normal course to
undergo Resolution, or partially
after organization there is contraction.
2. Chronic Broncho Pneumonia results
of Tubercular Condition, Lung
becomes absolutely dull.
3. Pleuritic form originates in
dry Pleura & fibrous material
extends to Lung - air res. Bronchodes etc
excepted.
4. Miller's. Coalminers Phthisis etc.
at apex of Lung. due to a form
of dust.

Temperature is Normal & an increase in
T.B.

is a Chronic Disease for it is a
sequence of some acute disturbance.

Physical Exam. There is Bronchial Resp. as
no air enters lung. There is also Bronchial Rcties,
Cavernous Resp. & surrounding tissue is Hard

Dullness on percussion. more than ordinary
also a woody dullness or flatness.
will extend to point of substitution
there is also a contraction & the
healthy lung is enlarged & presses
on the mediastinum causing displacement.
Heart may be pushed out of
position may be on right side.

Treatment Prevent T.B. Infection. support.
strength, give tonic, Small doses of
Bichloride of Mercury.

Jan. 2. '06. Common in old people frequent in young.
Broncho. Second and in majority or sequel. Typhoid
Pneumonia Mercules, Whooping Cough etc.

Affects those suffering from H.S. & mouth.
Bilateral disease. ^{originally} Capillary Bronchitis
frequently Cap Bron. Difficult.

Terminal Bronchi are first affected.
then extends to air vesicles.

Lobular Pneumonia from extent from Bronchi.
to air vesicles.

Extends to air vesicles in spots.

Areas of cells devoid of air.

May have Peribronchial thickening -
Aspiration Pneumonia. due to inhalation of
food presence of blood which passes
down to small parts form a localized Pn.
T.B. Broncho Pneumonia. spreads as tubercle
shreds.

Splenization is area inflamed & becomes
harder & may be entire occlusion.

Termination is by resolution suppuration.

may terminate in Gangrene (serious).

.. Fibrosis small fibrotic
spots remain & contract becoming useless
& normal cells dilate & compensate.

Jan., 9, '06. usually secondary may be primary
 Diagnosis: Help when disease precedes.
 When patient seems to be recovering a rise
 of Temp may come, resp. increased general
 uncomfortable condition. - examine lungs -
 Is Bilateral exists in identical parts.
 Preceded by Bronchitis which extends.
 was been called suppurative Disease.
 Lobes comes on in healthy person
 from 35-45 more likely to be Lobes.
 Death rate from 30 to 50%.
 Prog. depends on preexisting disease.
 Treatment: See that excretions are good.
 Dose of Calomel. Have a moist atmosphere
 a temp. of 68-70° favors breathing.
 If Dyspnea is great give emetic. Epsom Salts.
 don't keep them nauseated. 1 teaspoonful " "
 Cough Mixture Carb Am - 1 gr. every 2 hrs.
 Sy. S. pills
 Aqua Dist.

Do not use Opium

Use stimulants when needed. Whiskey

Jan., 6, '06. Emphysema of Lung. Yourishment. Predigested milk. Liquid Peptonoid.
 Two forms

Hypertrophic & Atrophic (Senile Emphysema).
 Development of Hypertrophic Emphy. may be decreased
 or stopped. Distension of air cells & atrophy of
 cell walls. may break together. Heridity Weak
 lungs a great factor. may be due to defective
 development of alveolar tissue. Cause may be
 due to increase function by long retaining
 air as glass flowers. Discussion

In suspected patients advise Hygienic measures -
 increase of alveolar pressure encroaches on
 blood vessels causes rise in Bld pressure
 & hypertrophy of R. Ventricle. also there
 may be an Edema of lung from same causes

Tendency of heart is to grow to the right.
 Levity after full extent of development &
 on extra section are excreted.

Expiratory effort. Prolonged
 Expiratory effort.

Treatment: little to be done. Hygiene & Warm

Intercurrent attacks of Bronchitis

Pleurisy Inflam. of Pleura.

Jan. 3. 06. 1 Dry & Adhesive Primary & Sec.

2 Effusion acute & chronic.

May be Primary or most commonly
 complications on secondary.

More or less lymph on surface of Pleura.

Have changes which find some change.

Independent dry pleurisy is rare in
 healthy people usually comes to T.B.

Secondary process most frequent cause
 of dry pleurisy is T.B. infection.

Pleurisy Effusion is not always by modern
 change in temperature. Most likely caused by

Microorganisms. Onset sudden. Localizing
 pain. With effusion from T.B. infection

onset is slow. pain not so intense.

Pain may not be over affliction occasionally.

Pain first 24-36 hrs is an acute dry

stage. Pleurisy on surface of visceral pleura

When effusion comes on pain subsides.

May have large amount of pleural effusion.

May compress on lung but other organs

not but when solid hyaline comes on

I. surface is great fluid volume to drain

but not all fluid. Golden yellow color.

this causes change in blood. & causes

effusion & is part of T.B. process.

Wheal in, it is a white tumor on the

Feb. 6. 06. Friction reduces when fluid is absorbed. may mis-
 lead to diagnosis of Pneumonia sound is fine soft.

Mediastinum Tumors. in a hoarse cough.
 Mediastinum may have the appearance of
 the mediastinal glands.

Mar. 13. '06. Tuberculous. First attack of or fixation
 May. has cavitation & tubercles in the
 & may spread. T.B. in an acute
 may cause Bronch & Pneumonia.

Heredity is very common in this.

Mar. 20. '06. Fresh air previous spread fewish most nearly
 immune. 36 yrs. less apt. to occur. acute
 15. is superior to tubercles. Women slightly more
 than men. Typhoid form P.T.B. acute.

Regular Temp. in acute P.T.B.

Mar. 27. '06. Pneumonic type. alveoli filled & a consolidation
 at that point. both apices affected, does
 not terminate by crisis (ever). course of fever.
 fever varies more in T.B. Pneumonia.

Runs a short course, many terminate in 3 weeks
 in death. Rusty sputum becomes 'Prune juice'.

Broncho Pneumonia. Temp. not so high. irregular

resulting from acute disease
 spread. Sclerosis may develop.

Chronic form. slow form. Conferata. Desperata

Modern. 1, 2, & 3 stage.

1st Insipient. of greatest importance.

April 3. '06. Chronic T.B. Symptoms. Slight irritations
 in the throat, to be seen 2 or 3 hr. after meals.

Sub-acute or chronic form. cough at
 same hour as day. Some h. dist. 'B.C.'.

Some expectoration in morning. Loss of weight.

Examination. Pulse 90-100. Cough with
 fingers some rustiness felt. dullness. Auscultation.

Prolong Expiration, roughened. jerky. No. as clear
 on deep breath. increased vocal resonance. No.

have thin lips. (muscular weakness). Treat with

Hygiene. Anti-tubercular Serum.

Diastolic murmur generally heard before first sound of heart, usually called mitral diastolic stenosis. Generally a contraction of Mitral valve may be transmitted generally heard anteriorly at apex.

Systolic murmur heard with first sound generally heard due to Mitral regurgitation. Regurgitation flows flowing back to auricle heard plainly near apex like distinct flowing also heard posteriorly below scapula. Systolic murmur heard at the notch heard during first sound due to Aortic stenosis. A contraction of Aortic valve more roughened murmurs.

Diastolic ^{murmur} after second sound caused by regurgitation from Aorta to L.Vent. defective valve.

Apr 11th Pericarditis: follows in the disease.

Idiopathic in children. Extension from the disease.

Acute Plastic Pericarditis (Baker's type).

May have fluid. T.B. Cancerous Chronic Pericarditis.

Constrictive & tuberculous may occur.

Septic & Purulent Pericarditis. Can be purulent.

Friktion in right & left of heart.

Effusion impairs action of heart. may have sufficing.

Symptoms not so pronounced.

Inspiration produces Pericarditis & there is no variation - Polio.

P is paradoxus.

Cardio Hepatic spine should be normal.

Left Patient must. may have to use respirator.

Also covers. Breathe in heart. Hourly.

I. 20. 20. 20. 20. 20. 20. 20. 20. 20. 20.

April 17th Endocarditis. Inflammation of endocardium.

Acute & Chronic. Benign & Malignant or ulcerative.

Rheumatism most probable cause.

Simple Inflammation. valves mostly affected.

Vegetative Stenosis of Aorta. may have Embolic trouble.

found mostly in children & young adults.

Lesions / it is seen in the ...

Mitral Valve most frequent affected
Auricular side. Aortic vent. surface next.
Bld. current has to due to these processes.

R. Side in aorta affected.

After birth L. side mostly affected.

Endo. does not always show Rheum. but there

may be a history of it most times in
May Complicate pregnant woman.

Pulse rapid & weak.

Malignant or ulcerative due to various kinds
Germs. more pronounced destruction. is a Septic

Patient becomes reduced. Eruptions similar to typhoid

Prognosis: bad. Strict attention & Dietetics.

See also. Digitalis not indicated.

Palcy after Rheum. probably a cause.

Keep quiet.

April 23, 06. Results of endocarditis. Affects Mitral

valve (incomplete) most common.

may be associated with Rheum. & Endocarditis

It is also common in the course of Rheum.

as in the case of Rheum.

Auscultation reveals murmur.

May 1, 06 Aortic insufficiency 1/3 of Cases.

Comes from Endo Card. from Rheum. Cusps

are distorted & ulcerated. Arterio Sclerosis

accompanies. found to produce aortic & mitral

Typical Exchert. develop. Rare is congenital.

Water hammer pulse. Early stage. When

disappears, the disease is advanced. later

Murmur of the second sound the second

2nd. mal tension 135 mm. may drop to 110.

This condition

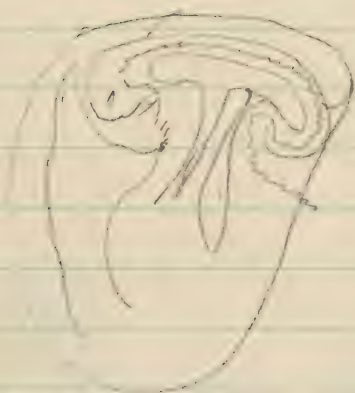
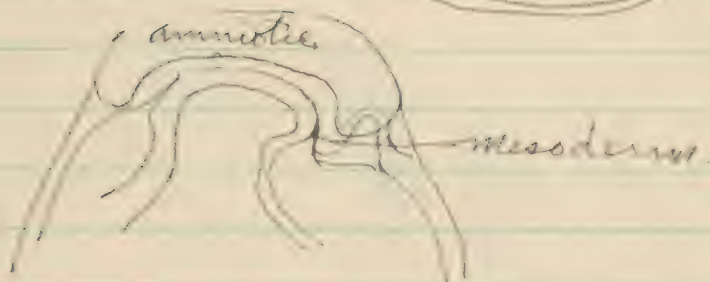
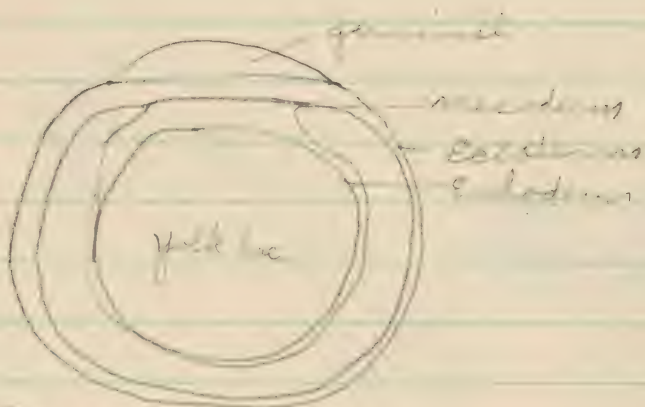
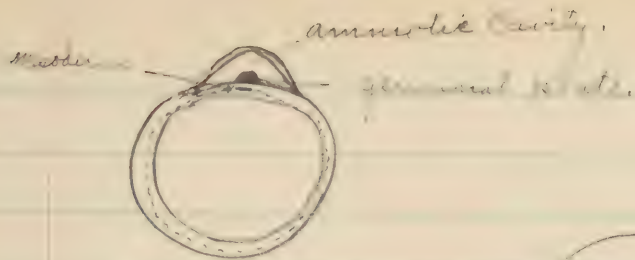
(Aortic & Mitral stenosis, little ventricle)

and 1

Nov. 7.06. Delirium Cortis extended for few days shows organic change.

Sodii Qu. $2\frac{1}{2}$ gm.

Tr. Dig. D. 4 gm.



Trophoblast. no power, dissolving
decidua. ^{intestine} will destroy blood
vess. wall & floor will later trophoblast.
Primary Intervillous space where the blood
enters.

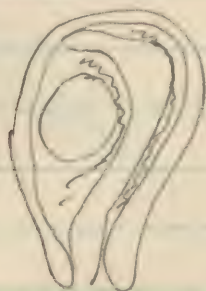
At this stage Mesoderm sends out projection
& this vacuologes the Projecting Villi.
Trophoblast & now is known as Chorion Villi.
Syncytium layer formed superficial in
trophoblast due to maternal blood in contact
or lower layer into Langhans cell.

first has no cell wall or division
Langhans is more distinct cell.

No mixing of maternal blood.
Fetal blood takes O_2 & gives CO_2 by
means of membranes.

Chromic Acid Extraction, Antitoxin Respiration.

" " begin in latter stage
to atrophy - hypertrophy as to Bld Supp
as next to Refl. Bld. Sup. is poor
this is called Chron. Laev & other Chron
from Locom



Decidua Refl. & Vera join together.

Albumin Deca some sugar amniotic fluid
500 to 1000 CC. Lg. 1007

Fetus may secrete thin or may be secreted
by Amnion Protects fetus, may nourishment.

Oligohydramnios - Small amt. of amniotic fluid.

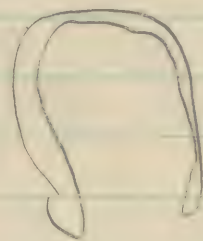
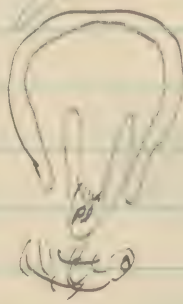
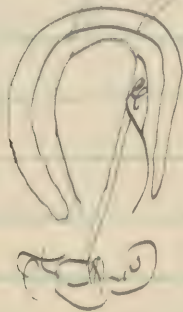
Amnion may gelatinate with fetus.

Polyhydramnios - excessive fluid.

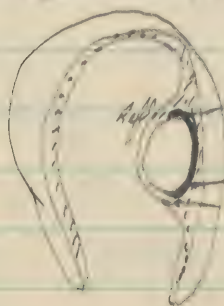
Umbilical Cord 50 to 60 cm.

Wharton Jelly - Embryonic Con. Tissue.

Lysol

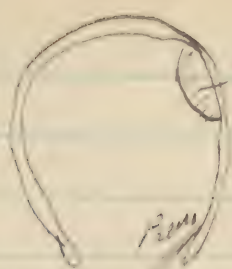


Placenta Membranacea large thin as below.



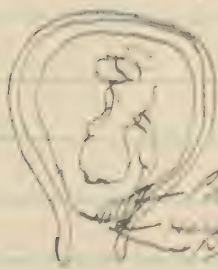
Decidua
Sustentiva

Placenta fons here
Part of this may help



Position of Placenta.

May overlap cervix (Pl. Previa)
is dangerous condition.
Part is detached when cervix opens & causes
a hemorrhage in early part.

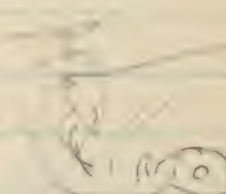
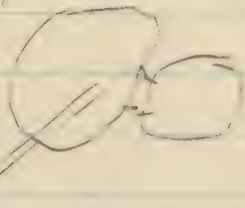
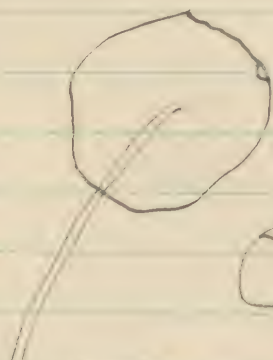


Previa

Pl. Previa



at Vagina



Pl. Previa

Intoxication of Pregnancy.

Onset first 5 or 6 months.

Change in Parenchyma of Kidney.

End products of Metabolism have toxic product.

Eliminated by focus. urine, perspiration.

Chemical Disturbance is another means of
Elimination.

Pregnant woman eat more indigestible

More toxic end products from fetus etc.

circulation thrown into maternal part.

may be dissolved & get into blood.

Placenta a toxic tissue

Contains fetal tissue making it toxic.

Heterogeneous to uterus.

Fetal metabolism may be cause when dead
symptoms stop.

Constipation natural, interferes with toxic
elimination also respiration interfered with.

Compensated H.D. Arteries ^{arteries} interfere with kidney.

H. & gested causes some albumin.

Liver organ of Chem. Destruction.

Jan. 12. 06. Path. Toxemia when Equilibrium disturbed.
Fetal Metabolism.

Circulation.

Organs of Defense unable to keep functioning perfectly? Insufficient at time of Pregnancy is bld. May be Congenitally deformed

2. Diseased Condition. Underdeveloped

Thyroid cause of Toxemia.

Predisposed & Diseased caused by Pregnancy.

By toxins accumulate in bld form the
Sub for Blood & by same again affected, i.e.

Symptomatology. Headache, Vomiting.

Headache. convulsions. Increased irritability
of Nervous System.

These diseases which occur in Pregnancy
are due to these toxins ~~not~~ by these increase
in severity & any other causes given
for this only aggravated the condition.

such as Hypertension etc. & the different
diseases such as Eclampsia & Severe
Vomiting are caused by different kinds
toxins (Ehrlich's Theory of Basis).

Treatment: Decrease as much as possible
the introduction of toxins which is very
limited. Interruption of Pregnancy in severe
cases.

Increase Elimination & action of Defense Organs.

Jan. 18. 06. Placenta Vein 1. 2 arteries.

Arterial Bld in Placenta

Ductus Arteriosus between Aorta & Inf. Ven. Cava.

Other part goes in liver & to Inf. V. Cava & some
from Vena Cava Proper. Carried to R. Atrium

1. Strikes Foramen Ovale con. to L. Atrium then

Eustachian Wall reflects bld to L. Ventr. then

into L. Ventr. leads the aorta branches to the

& Descends to hypogastric arteries which

Con. with P. A.

One part from R. A. to R. V. & into Pulmonary Arteries. & Lungs not Developed but goes thro Ductus Botalli to Aorta.

Dec. V. C. also enters R. A. & this goes to R. Ven. Cannot go thro For. Oval.

Obstetric
Dorsett.

Natural Labor

Unnatural labor is where distotia is present. What is cause of Labor? Fetus Mem. Placenta become foreign bodies at a certain time & Nature attempts to expel it.

Expulsion of After Birth { amnion. Chorion. Placenta. Clot.



Placenta Uterus active Plac. Passive & is detached by uterus.

Muscle of Cervix dilates the rest contracts.

Third dilator? uterus. evenly around cervix. Dynamic contraction is in Cervix by introduction of finger.

When Bag breaks only a certain part of water escapes. the rest shut off by Fetus forming valve.

Feb. 9. 06.

9 Lunar Months. 280 Days. count back 3 months + add 7 days. from beginning of last menstrual period. does not hold good with irregular menstruation.

Presentation refers to part presenting body Position relates to presenting part & ^{relation to} canal. position determined by Head beam.

L. O. A.

L. O. P.

R. O. A.

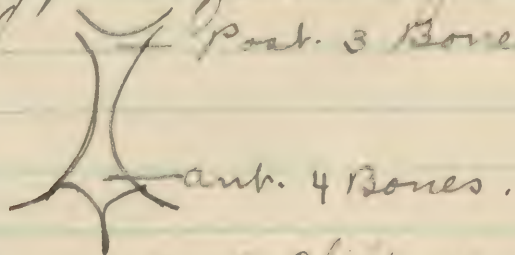
R. O. P.

Three stages for convenience.

First " from begin^{ing} till Presenting Part passes thro cervix of uterus.

2 = 3 stages

Prominence of Sacrum higher level than Pub.
 Egg Plant Blue of Cervix & Vagina.
 Post. 3 Bones.



Feb. 16. 06. Movements of Child's Head.

Head in previous position of Body uterine neck dilates. Flexion makes long diameter shorter.

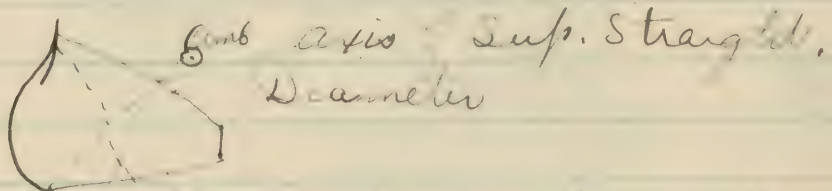
Extension Flexion & rotation

Ex. means elevation of Chin

Fl. " dropping " "

First of flexion, then extension then external rotation.

Bladder or bowels may be full. Cord may be around neck.



Diameter of Inf. straight
 Axis of Sup. straight.

Mar. 2. 06. Patient lies on back knees flexed on right side of Bed. Give enema for bowel. pass water. Douche before Labor is Gysol preferably Vaseline put up in tubes. Examine Cervix & Rectum & Bladder. Check vagina. next condition of Cervix. to see how far case is advanced next size of Pelvis. & to find out if patient is Pregnant or not. Condition, thickness & elasticity of Cervix. Straighten legs to relieve cramps. After Chin drops over Perineum there is rotation & lower arm is born. then child's head. Close eyes see to respiration. If cyanotic let Baby sleep some. If asphyxiated place child in hot water.

Nov. 10. '06. Perineum wound closed immediately.

Cervix repaired to stop bleeding.

Sepsis may come on immediately, initiated by child, rise in Temp. may be very great!
Examine Placenta. May have lacerations entering
ab. cavity & Peritonitis comes on. Lymphatics
may take up material & have general sepsis
without Peritonitis. Engorgement of Breasts
may cause high fever on 3rd day - not serious.
Use Placental forceps & Sims Speculum.
follow with irrigation then curet & wash
again. 20 gr. Iodoform suppository, sterile in
neck of uterus & pack carefully with G. gauze.

Mechanism of Labor we understand the
operation of the mechanical forces
of the execution of the mechanical
movements necessary to secure
the passage of the child thro' & its

exit from the Parturient canal.

Oct. 3. '06 1. Obstetrics means caring for women (& child)
during pregnancy, labor & puerperal state.
Meaning dir. of teaching.

2. Synonyms: Midwifery, Tocology, Parturition,
Accouchement, Maternity.

3. Obstetrical Science means. The classified knowledge
of the laws of human reproduction.

4. Obstetrical Art means - The rules drawn from those
laws which are to be observed in practice.

Oct. 5. '06 English School dates from Royal College of Physicians
1815. Dr. Linae. Peter Chamberlain reinvented
the obstetrical forceps early in 17th century
Sir Filding Ould / Dublin described Mechanism of Labor
1141. Dr Demare 1841 19 centuries wrote of complications
of Puerperal fever thro' unclean Drs. & medicine
French School dates from time & work of Pacc 1510
great surgeon & Obstetrician called by Smellie The discovery

Restorer of Midwifery 17 Century just hospital for
instructions to men. Andre Leore 1747-1758 improved forceps

Namessian 1718 described Phenomenon of Labor.

German School 1773/1815 most accurately described
mechanism of Labor. His Classic Pamphlet (1818) called
Essays of Obstetrics. (F.C. Naegele)

Greek History. Hippocrates was born in Cresculapian temple
where father was Priest & Physician 400 B.C. mother a Midwife
Called father? Medicine 1. First scientific writer on Medicine
including Obstetrics 2. Separated Midwifery from Medicine
3. Introduced clinical study kept records.

Plato 400 B.C. Aristotle 350 B.C. founded Alexandria Library.
Celsus 25 B.C. Chief of Medicine Soranus 78 A.D. first
book on Obstetrics. Aetius 502 A.D. Compiler of Med
Knowledge, described Version. Craniotomy. use of Forceps,
peculum, erotchet.

Arabian School Rhazes. A.D. 850 described use of forceps
& Obstetrical instruments used by Egyptians.

Oct. 17. 06, Hygiene of Pregnancy.

Related to

Diet
Clothing
Exercise (a) fresh air & Sunshine.
Rest & Bathing
Elimination { Kidneys
 { Bowels
 { vaginal douche.
Sexual intercourse.
Care of { teeth
 { nipples.
Mental Condition.

Physician should give special attention to. { Examination of Urine.
 { Pelvometry.
 { Physical & Vaginal Ex.
 { at (7) Mo. of Pregnancy.

Pregnant woman should be warned of & consult Physician for:
Danger Signal. a. Abdominal Pain.

B. Vaginal Hemorrhage. C. Persistent headache & dizziness
D. Epigastric pain. E. Nausea & Vomiting late in Preg.
F. Edema { Local { Anasarca
 { General

Should avoid

Lifting, stretching & reaching
Cottion & over exertion.
Blow upon abdomen.
Riding over rough roads.
Long railroad journeys.

Diet: Drink water & milk. Milk increases size of child. avoid strong tea & coffee & alcohol.

Exercise: with care & judgment. Moderation.

Vaginal Douche. May irritate. Hot Douche 4 times a day causes Abortion. Never use Hot. warm. tepid one to two pints with no force.

Sexual intercourse: Avoid first 2 or 3 Mo. not near the time of Menstruation period. & latter stages.

Care of Teeth & Nipples. Keep mouth clean more apt to suffer from bad teeth. Neuralgia common. Deficiency of Lime Salts or acid eructations may be cause. Mouth abounds with Lactic Acid. Milk of Mag for teeth.

Last 2 Mo. Raise Nipples moderately every day in poorly developed cases. Keep clean & soft.

Oct. 24. 06. Obstetrical Medication. 1. During Pregnancy.

Dr. Hynes. a. ~~Ergot~~ 3. Strychnine. Syr. Lacti-Phos/Lime.

Uterine Tonics & Aborti-

Anaesthetics.

facients } Viburnum
Cimicifuga Fl. Ex. 1/2 Dr.

Avoid Ergot. & large doses

of quinine. Aletris

During Labor: anaesthetics. Ether

+ Chloroform. Chloral Hydrate.

Morphine & Cocain. Spinal

anaesthetics; Morphine & Ergot

During parturition;

Ergot; Strychnia.

advantages of. a. Diminishes Pain.

Relaxes uterine spasms & assists in dilating Os Uteri. Lessens danger to Perineum.

Disadvantages: Lessens uterine contractions. predisposes to post partum hemorrhage. When excessively used, to blood change, to sub-involution, sepsis & dangerous to child. Fl. Ext. anesthetic preferred given after 3rd stage of Labor. Hypodermic most reliable in dose of M. 15 to 3T. Especially indicated after chloroform. Benefits.

Persistent headache. Dizziness

pressure back of eyes points

toward Urethra poisoning.

Uncontrollable Vomiting connected with Uremic condition.

may be of septic origin. Edema indicated with Kidneys.

Lessens danger of Haemorrhage & Sepsis. Lessens after pains & promotes involution

Oct. 26.06. anesthetics - partial Chloroform & Ether

Soothes pain. quiets nerves. relaxes Uterus
Pressure from 80 to 30 lbs. 39. 80. Excess causes changes in blood
cells & Fatty Deg. Heart etc. Produces Post Partum Haem.

Oct. 31.06.

Fluid extract of Ergot. (aseptic preferred)
give after 3 stage of Labor. Hypodermatic administration
most reliable. Dose 15 min. to 3T

Chloral Hydrate for spasmodic contraction of Os. 15 grs by
mouth every 15 min for 3 doses. or 20 grs. etc by rectum
Morphia for highly irritable patients.

Morphia ^{severe} 1/2 gr. 1/3 Chloral Hy in Pepp water 3i. teaspoonful.
every 15 min for 3 doses. Cocain for local application to
os. Uteri. for great pain. Spinal Anesthesia inject
Cocain & Eucain into Cord. not used much.

Ergot especially indicative after chloroform.

Benefits: It lessens danger of Hemorrhage & Sepsis.

Lessens after pains & promotes involution.

Ergot & Rye most important Solid. powder fluid extract.

The Ex. contains Ergotinic Acid Cornutus Sphalanaly this Acid
contracts Involuntary muscles. Aseptic form devoid of Acid. Ergotine P.D.
first contractions are Peristaltic then tetanic Contraction. Tonic Contra
Strychnia. gives strength & vitality & tones uterus.

Nov. 8.06.

Indications for
induction of
Abortion. { Foetal { a. cystic degeneration of chorion.
b. Acute hydromnios
c. Foetal death.

Mothers life
threatened by path
state of herself or
foetus as from { Maternal { 1. Nephritis.
2. Uncontrollable vomiting of Pregnancy.
3. Irreducible retroversions of fundus uteri.
4. Marked contraction of Pelvis and Abdomen.
5. Pernicious Anemia.
6. Chorea & Insanity.
7. Chronic heart Disease.
8. Placenta Previa (some cases).
9. Albuminuric retinitis.
10. accidental Hemorrhage.
11. Eclampsia.
12. Disease of growths affecting Pelvis & uterus.

I Labor.

1. Natural

2. Artificial

3. Postponed. { child
alive.

4. Mixed. { child
Dead.

I Date.

1. Goulavisk - 3rd wks

2. Embryonic 1-3 mo.

3. Foetal after 3 mo.

Classification

Spontaneous.
 Artificial Artificial { Therapeutics.
 { Criminal.
 Incomplete.
 Missed.

Drugs used to induce abortion.

Ergot. Quinine. Pilocarpin. Ustilago.
 Pills of Tansy, Pennyroyal, Savine, Parsley.
 Act by causing congestion of Placenta & vessels.
 all are unreliable.

Nov. 14.06. Indications for induction of Premature Labor.
 Generally for life of Mother or fetus.
 Threatened by some Pathological Cond. as.

Fetal	{	Premature ossification.
		Habitual death late in Pregnancy.
		a Pelvis $2\frac{1}{2}$ - $3\frac{3}{4}$ C. V.
		b. Placenta Previa.
		c Extreme debility.
Maternal	{	d. Eclampsia.
		e. Accidental hemorrhage.

Premature labor indicated with.

Pelvis $2\frac{1}{2}$ in at 28 th wk.

"	3	"	"	32	"
"	$3\frac{1}{3}$	"	"	36	"
"	$3\frac{3}{4}$	"	"	38	"

Reliable methods for induction:
 first 3 Mo.

- a. Tampon cervix with Iodoform or repeat in 2 hrs.
- b. Dilate instrumentally or uterine removal
 foetus by finger or curet.

2nd after 3 Mo.
 Same as Premature.

3rd To induce premature labor.

- a. Catheterization of Uterus (Krause's)
 - b. Tamponade of Cervix - Vagina. Still better of Uterus.
 - c. Dilatation of Cervix (Manual or water bag).
 - d. Rupture of membrane. Dührssen's incision of Cervix.
- When indicated terminate labor by forceps or vacuum.

To induce premature labor.

Methods: Catheterization of Uterus (Krause's)

Dec. 5.06.

Dec. 7.06

{ See sketches.

Dec. 21. 06. Indications for Symphysiotomy

1. Flat pelvis & Contracted.
2. Conjugate Vera 7 to 9 cm 2.6 to 3.1 cm.
3. Impacted Brow Face & post. Position.

Contraindications { Pelvis less than $2\frac{3}{4}$ in.
 Tumors cancer or other obstruction
 Ankylosis of sacroiliac joints.

Dangers { Sepsis.
 Fistulae - Ves Urethra - Delirium / Locomotion
 Haemorrhage & Injury to soft parts.

Symphysiotomy lengthens all diameters.
 With Separation $2\frac{1}{4}$ in. C.V. increases $\frac{1}{2}$ in.
 Obliquely $1\frac{1}{2}$ in. Transversely $1\frac{1}{2}$ in.

Jan. 4. 07. Indications for Caesarean Section.

A. Contracted Pelvis.

Ant. Post. Diameter below $2\frac{3}{4}$ in.

B. Mechanical Obstruction of Pelvis by
 soft or bony tumors & Cysts

C. Impaction - Irreducible - of child in
 transverse presentation.

D. Obstetrical accidents or anomalies { Rupture of Uterus
 1604 first successful operation. { Eclampsia.
 Placenta Prae-

Porro Operation 1st Labor prolonged, bag
 water ruptured. Extensive Manipulations,
 making sepsis probable.

1876 Removed whole uterus. 79% Miller raised uterus &
 2nd. Diseased uterus requiring a 2nd operation.
 3rd. Growths etc obstructive passage.

Saenger 1882 New method of stitching 90%.

Advantages: A. No Haemorrhage from Uterine
 B. No Uterine wound to suture
 C. Wound is Extraperitoneal hence less chance
 for Sepsis.

D. No Subsequent Pregnancy.

Embryotomy; Embryulsoomy.
 generally cutting below head.
 Craniotomy upon head.

Craniotomy.
 Evulsion } Evulsion.
 Decapitation } Excavation.
 amputation } Extremities.

Instruments for Craniotomy { Perforation. } Blat's
 Cranioclast. } Smellie's.
 Cephalotube.
 Basiotribe.
 Forceps.

Indications for Embryotomy.

1. Malproportion between Child's Pelvis.
 Hydrocephalus.
2. Monstrosities & other mechanical obstacles
 to deliver such as impacted shoulder Presentation.
3. Post. Rotation, Chin in hollow Sacrum
 Locked twins.
4. Child dead or a monster.

		in.	cm.
Female Pelvis.	Brim { ant Post.	4	10.1
	Trans.	4	10.1
Living.	Oblique { R.	5	12.7.
		4 1/2	11.4.
Internal Diameter.	Cavity { ant. Post.	5 - 12.7.	
	Transverse.		
	Oblique		
outlet { ant Post.		4 1/2 - 5.	
{ Trans		4	
{ Ob.		4.	

Est. Diameter by Pelvometry.	Intercristal	10 1/2	26.6
	Interspinous.	9 1/2	24.1
Living	ant. Post	7 1/2	19.
	Oblique	9	22.8.

Dia. of Skulls Head	Occip frontal	4 1/2	11.4
	" " Mental	5 1/2	14.
	SubOccip Bregma.	3 3/4	9.5
	Fronto mental	3 1/2	8.8
	Bi Parietal	3 1/2	8.8
	Bi temp	3 1/4	8.2
Bi mastoid		1 3/4	2.6

Distocia arises from anomalies of

1. Forces:

- a. Excess = Precipitated Labor.
- b. Deficiency = Delayed labor inertia uteri
- c. Spasm & irregularity, rigid os & Cervix uteri Tetanus

2. Passage:

a. Hard Parts Pelvic deformities.

b. Soft Parts

- 1. Atresia of Cervix.
- 2. Rigidity " " "
- 3. Impaction " " "
- 4. Malposition " Uterus.
- 5. New growths " " "
- 6. Stenosis & rigidity of Vagina.
- 7. Haematuria of Vagina.
- 8. Labial Abscess & Cyst.
- 9. Condition of Bladder.
- 10. Tumors, swelling of various tissues
- 11.
- 12.

3. Passengers:

a. Malposition of Head. Occip. Post. Cases.

b. Malpresentation.

- 1. Face. 2. Brow. 3. Breech. 4. Transverse.

c. Protrusion of limbs.

d. Abnormal foetal development.

- 1. Shortness of Cord.
- 2. Unduly ossified skull.
- 3. Large size of Fetus
- 4. Death of Fetus.
- 5. Disease " " "
- 6. Pleural Births.
- 7. Monstrosities.

Causes of Inertia Uteri.

- 1. Emotional Disturbances.
- 2. Full Bladder & Rectum.
- 3. Imperfect development, uterine muscle

4. Fibroids
5. Disease of Uterus.
6. Excessive uterine distention.
7. Abnormal adhesions of Membranes.
8. Dry Labor.
9. Displaced uterus.
10. Frequent Labor.
11. Precocious or advanced age.

Labor may be rendered difficult by:

1. Abnormality of involuntary forces.
- Voluntary .. Abd. Muscles.
- resisting forces of inertia uteri

Jan. 30. '07. Delayed Labor may be defined as occurring whenever at any stage of parturition a considerable period elapses without satisfactory progress or when signs of Exhaustion of mother or child appear.

Uterine inertia is that condition in which the uterine contraction by weakness or irregularity are insufficient to dilate the Cerv. 1st stage or expel the fetus 2nd stage.

Explanation of certain expressions indicating character of Labor:

Primary inertia: sluggish action of uterus from lowered muscular or nervous tone. as extreme age, invalids, cases of twins. weak pains occurring at long intervals.

Secondary inertia: generally slight obstruction but contractions feeble or strong at beginning of case.

Uterus exhausted flabby no tenderness. No constitutional reaction save fatigue 2nd stage. Tetanoid contr.

Uterus developed with obstruction.

Tonic contractions. uterus hard, tenderness marked constitutional symptoms develop rapid pulse. sighing respiration. face anxious fever. restlessness. vomiting dry & coated tongue. Coma. Convulsions. Death. treat cause. Nervous weak women should have strychnia for 20 days before labor. Quinine good. When os indilatable may rupture waters not otherwise.

Jan. 9. '06. Pavement Epithelium covering of Uterus. some ciliated form to carry ovum. Basement membrane & muscular part.

Mucous sacs, glands. in Epithelium dipping in mucous structure

Muciferous glands involved when cervix is inflamed caused by some organism.

Acute - Chronic. Endometritis.

No organisms beyond External Os. thus a laceration may admit such. Find cause or treatment.

Acute: Symptoms of Early Inflammation.

Treatment: Rest. Cathartic. Astringent*

Prog. depends on cause & treatment (Radical).

Curement. Irrigation mild antiseptic.

Cotton - glycerine for 12 hrs. day two.

Beware of Curet when inflammation is abated.

Jan. 10. '06. Displacement of Uterus: 35° tilted forward. freedom of movement before & back. limited to sides. Power itself. its right concern diag. Weigh 2.5-3.5. Look for Pater's tone of ligament etc. Upward dislocation. tumor association. Downward " (prolapse) 1, 2, 3 degree.

Laceration of Cervix

Jan. 17. '06. 2 1/2 times as often caused in female as male.

60% of female Cancers are found in Uterus

Must be due to injuries or physiological disturbances. injuries at Child birth common Acid secretion to irritate. & Microorganisms

introduced Primarily in Neck of Uterus. rarely in Body Age of Child Bearing period. After Menopause is not so frequent.

Symptoms: General History. age. Mucous membrane bleeds readily when touched. hard examined Microscope. Radical treatment.

Jan. 24. '06. Uterine Fibroma may occur at any period in life. More Early than Carcinoma location Post.
 May be sub-mucous. Subperitoneal. Or.
 in hypertrophy of Non Striated Muscle fiber.
 + Connective tissue grows slowly.
 Develops from Epithel. has few blood vessels.
 but surrounded by large vessels. usually Intestine.
 May be cast out. Pain a symptom.
 Prognosis favorable. Remove Early.
 Hemorrhage prominent symptom.
 Differentiate from Pregnancy + Carcinoma.

Feb. 21. '06. Menstruation. In utero, no menstruation
 in difficulties attended with pain.
 Menstr. Abnormal during period.
 Unusually due prob to organic change.
 Displacement of Uterus.
 Pelvic pain cause. Pelvic strain.
 Location of Cervix. Endometritis.
 Retention of some portion of secundines.
 Anemia.

Feb. 28. '06. Fallopian tubes. 4 in. long.
 Isthmus 1 in. Ampulla $\frac{3}{4}$. Fimbriated 2 in.
 covered outside by Peritoneum
 Muscle fibers similar to those of Uterus.
 above + to one side of Broad Lig.
 Lined with Ciliated Epithelium.
 Glands of Rose Mueller.
 Psoepix. * Hydrocalpine.
 Treatment indicated.
Ectopic Pregnancy.

Orices Almond size 1 1/2 in. Trans. 1/2 in. Perpendicular
Ant. & Post. borders. Located in Infundibulum 2 1/2 in.
held in position by covering P. Peritonium. Covered
by Columnar Epithelium. Infundibula ovarian
lig from Fimbriated fold of tube.

Covered with dull Columnar Mucous Epithelium.
Graafian follicles 40 to 7000. Tunica Membrana fibrosa.
Muc. granulosa. Liqueous funicula, round for in.
E. Envelope, yellow. Germ. vesicle, germ. spot. 300 in.
Cystic body. 1/2 in. free at end of tube.
Use Anesthetic to examine.

Hepatic / Ovarian. Tense line.

Facial Granular. Drawing of Muscles & Adhesions.

Draw down uterus at tumor does not move. Uterus
not attached.

Post operative suppurative Peritonitis.

Peritonium. 1 gm. pt. Absorption power
Microorganisms may exist within body at
time of operation.

{ Glycerine	{ 1/2. powder Alumina.
{ Sulph. Naz.	{ Water
{ 1/2. Turp.	for accumulation / use.
{ Water	

Oct. 8 '06

Born.

Examination at Patient's home

1. Lying lengthwise on bed.
2. Lying crosswise on bed.
3. Lying on Kitchen table.

Anesthetics. Antiseptics. Boil gloves 5 min in
1/2 Sol of Bicarb of Soda.

Preparation of P. for Examination. Empty Rectum
by enema or Cathartic evening before. Empty bladder
by Patient herself don't catheterize. Give Douche if
instruments are to be used. Lubricant Liquid soap
Sterilized White vasoline for instruments. Glycerum

Dr. Dorsett.

Oct. 9. '06

Born. 1. Index finger & thumb extended other fingers on Perineum.

Oct. 15. '06.

2. All fingers & thumb extended.

Gynecologic postures of Patient.

1. Dorsal. Elevated. 4. Knee Chest: Elevated.

2. Dorsal Sacral. 5. Lateral prone or Sims

3. Erect Positions. 6. Horizontal Recumbant.

Microscopic Examinations. { tissues.
Discharges.

Tissues. obtained 1. Curetment. 2. Excision.

3. Removal of Entire Growth.

Discharges. 1. Slides.

Oct. 16. '06.

Uterus movable. Fibroid tumor. Anterior Mass

Dorsett.

2. Subperitoneal. 3. Submucous.

1. growth in wall of uterus. all originate in wall of uterus.

Oct. 22. '06.

Born.

Vulva Vaginal glands are between hymen & Labia.

Examination of Abdomen:

R. Upper quad. Gall Bladder Liver

L. " " Stomach, Spleen, Part of Kidney.

R. Low q. ap. See above.

L. " " Rectum & Sigmoid.

Inspection. Palpation. Percussion. Mensuration.
Auscultation.

Inspection: Contour. Movements of Ab. Wall. Appearance of Skin.

Oct. 23. '06

Dorsett.

History: Name. ~~Age~~ address. Date of first visit. Age.

Physical signs. Number of children. Number of Miscarriages.

Married or Single. Age of first menstruation. How long ill.

Principal symptoms. Diagnosis.

~~Menstruation~~. Supposed cause.

Present condition. Date of last confinement.

Menstruation { Regularity. " " Miscarriage.

{ Amount. " " Catamenia.

{ Duration. " " By whom referred.

Discharge { Character. " " cond. of Bowels.

{ Amount. " " " Bladder.

{ Consistency. " " " "

Pain along Crural Nerve means inflammation of Pelvis.

Pain { Locality.

{ Degree.

{ Character.

Pain in top of head Chronic Pelvic uterine trouble.

Physical signs: (Case seen at Baptist Sanitarium)

Nov. 13.06. Patient. 44 yrs. hemorrhage 3 yrs ago. Bleeding for 2 yrs. Later history of Bleeding & bad odor. Ulcerated spot at cervix. Odor comes on when endometrium beyond Os is involved.

Nov. 20.06. Classification of Wounds

Dec. 17.06. Subcutaneous injuries of Vulva.

Open - Incised. lacerated. punctured.

Echymoses - Hematoma is circumscribed.

septic or aseptic. Shock may accompany lacerated w. Secondary hemorrhage severe at times Sloughing may take place. Hot fomentations. H_2O_2 . Punctured wounds may be infected.

Diseases of Vulvitis:

Haematoma circumscribed swelling due to infusion of blood into connective tissue. Causes: Claustrated Vagina Pregnancy. Direct Labor Traumatism, musc. efforts. result of forceps. straining at stool. cough. vomit etc. Large Haematoma. Pain. Allures disturbs Bladder & Rect. May become infected. May become absorbed or encapsuled. Open. sore or pain. Deep cultures. enclose in capsule. Do not suture during Labor.

Jan. 7.07. Gonorrheal Vulvitis specific infection. gonorrheal.

Most frequent cause & violent. Urethra becomes involved early. Bartholin's glands may be affected. Occasionally inguinal glands. Violent character & history, other glands involved. Prog: guarded.

Latent form of disease. Treatment & destroy cause. Bichlorid 1 to 5000. 5x a day. 25% aqueous sol.

of argyrol on tampon. Compress on Vulva.

30 grs. to 100 grs. Nitrate of Silver to seal parts. dust then with milk powder. Vulva Vag. Bartholin's glands are affected. Gon. most frequent cause? Abscess.

Discharges. Extension. Traumatism may cause it.

Puerperal sepsis may cause abscess. glands may become cystic. Abscess usually unilateral. Pain.

itching. Pruritis. Dorsal position most comfortable.

Swelling & edema. some feces. opening / duct
like flea bite (Gon. Macula). fluctuation
may be felt. Contents are infectious pur.
Palliative before suppuration. place in bed
use hot fomentation. Open bowels Morphine
for pain. For Suppuration. per. incision
Dress the wash out 1:8000 Bichloride & Carbolic.
then open up duct & urethra is & disinfect it.
Don't suture opening out pack & use compresses.
May have relapse.

Hæmorrhoids Internal Permanently inverted etc.
usually in L. Maria. 2 Causes. 1. Pregnancy.
2. Other interference of venous cir. Prolapsed Externals.
adhesions turn into deep ulcers. Consti.
nearly lifting. Some straining.

When large symptoms itching burning
pulling down. aggravated by walking sitting.
Dark blue colored veins. Boggy sensation pressure
empties & fills. may be very large. During
Preg. partly disappear after gestation.

May rupture under skin Hematoma may
become adherent & form Ext. Haem. May become
infected. Eczema & Ulceration may occur!

1. Palliative 2. Surgery.

1. In Preg. Hot Compresses. T Bandage.
regulate bowels. don't restrain or lift. Lie down.
Hot or cold compresses. Lead or Cadmium water
may relieve. Direct pressure on opening for hemorrhage.
2. Operation Incise 1/3 in use Catgut & ligate
& dissect out & close. Antiseptic compresses

Jan. 8.07. Rupture of Perineum: Trauma.

Jan 14.07. Occur on perchette. labia. Vulva vaginal orifice
Veneral on cervix. Chancroids. Vestibule. Rarely
Ulcer. found on walls of vagina. Thighs urethra. Abd. James.
Wounds can be carried. Prostitutes mostly affected.
Anatomic relation causes a worse prognosis. Scarcely
also irritate. Urine also. friction during walking

Differentiate from Herpes. Chancre. Cancer. Exema.
 infection. Chancreoids appear within first 5 days
 to 12 days. there is rapid development - multiple
 involvement of lymphatics. may break down & form
 ulcers. Characteristic appearance. Look punched
 out edges undermined. painful to touch, inflamed.
 profuse discharge. Treatment: Destroy local
 infection. Cut out. cauterize then burn. or acids.
 Mercuric cataphoresis: ^{+ Pole} Cleanse with H_2O_2
 Place of nose between labia. use iodoform powder.
 Stimulating ointment. Zinc oxide.
Chancre initial lesion of Constitutional trouble.
 Not so characteristic in female. Location is
 opposite on female & male. less frequent about
 Vulva & parts: 1. Labia Majora. 2. Perineum 3. Anus.
 4. Clitoris 5. Mons Veneris. 6. Groin. rarely on cervix.
 Not on walls of vagina. Diag: Herpes. Chancreoid Cancer
 3 wks. after inoculation. Indurated mass may
 simulate chancreoid when irritated etc.

Jan. 21. '07.
 Born.

Mercuric Cataphoresis for Chancre.

Secondary Syphilides. Constitutional tr. first
 May discharge use Bichlorid & Mercury.
 Vag. tampon 2 daily. Silver Nitrate Stick.

Veneral Warts produced by Heat, irritation, moisture.
 Remove them. Remove Cause. Keep dry.

Tertiary lesion. Gumma. - Labia Maj: round
 tumor, becomes soft. Bluish discharge, suppurates.
 Adhesion of Clitoris similar to Prepuce.

Examine Child at 3 months. this sets up Neuroses
 ill health. Masturbation. Remove adhesions.

Cover parts with Carbolyzed Vasoline.

Vagina. Diseases mostly in lower 1/2.

Cystocele. } To see rectum etc. ask P. & Ba. low
 Rectocele. }
 Neoplasms. }
 Cysts. }

Jan. 29.07. a. Malformation of Vagina.

Dorsett. 1. Persistent Chloasma. Common opening.

Feb. 4.07. 2. Absence of Vagina failure of Mullerian D. to unite.
3. Double Vag. imperfect Coalescence of Mullerian Ducts.
Stenosis of Vag. contraction of Mullerian ducts.
B. Mounds of Vag.

1. Associated with other structures.

2. Labor. Coitus.

syn. Not much Pain or Haemorrhage. impaired function.

Retraction of edges. not longitudinal. May have fistula.
May have shock. Results depend on extent of.

Cellulitis, Peritonitis, fistulae etc. Treatment: check blood.

Don't use styptics. Look for shock. pack uterine secretion
trim edges. stitch - Catgut. Pack with antiseptic gauze.
rest. dress every 24 hrs.

Feb. 25.07. Cystocele.

Tear of Ant. vag wall. Relaxation.

Laceration. Protrusion of uterus.

Sensation of distention when standing. bogging in Pelvis

Ant. Colporrhaphy. operation for cystocele.

Mar. 3.07. Rectocele symptoms / distension etc. difficult
defecation etc. bulges on straining.

Operate to repair. Post. Colpoperineorrhaphy.

Mar 11.07. Uterus: Malformations double duplex. tubes have
not come together. Septate. & two horned. & one horned.

Rudimentary: no organs. Fetal uterus: arrested at time of birth.

greater part of U. is C. Canal. Infantile uterus. up to Puberty.

Absence of Uterus.

Injuries of Uterus: rare.

1. Partition rupture.

2. External Violence.

3. Internal " operations. curettage. Crim. abortion.

Treatment for puncture: Rest. keep bowels open. no Douche.

No enemata. & septic open up abdomen

& sew up hole if aseptic or removal if septic.

Mar. 18.07. Lacerations of Cervix. from labor, forceps, ergot.
premature rupture, Malignant infiltration. Abortion.
complete & incomplete.

Symptoms: Subinvolution. Salpingitis etc. bearing down
pain in pelvis, headache, backache. Leucorrhoea, sterility.
constipation. May lead to cancer later on.

Vag. touch, indirect inspection.

ulceration in Carcinoma. May have eversion of Mucosa M.
Radical treatment in about 3 months.

April 1.07. Version - flexion. - Inversion: Tumors, weak
wall etc. Torsion. Causes of displacements:
Those which interfere with strength of uterine ligaments.
" " destroy supporting power of pelvic floor.
" " impair sustaining action of Pelvic Organ.
" " weaken retentive power of abdomen.

Feb. 2. 07. Anomalies of Pelvis in { size.
causes: } Inclination.

Diseases of Pelvis:

Rachitis.

New growths.

Osteomalacia.

Anomalies of form:

Fracture.

Caries.

Firm union of joints.

Loose

Disease of spine, Disease of Bones of Limbs.

Forms of contracted Pelvis:

more common Varieties

Rachitis - Flat -

Justo Minoris.

Oblique Contraction from hip joint

Less common:

Kyphotic. Scoliotic. Osteomalacia.

Male shaped. Spondylolisthetic

Roberts transversely contracted.

Naegels Obliquely.

Narrow of Brim. Simple Flat. Rachitic pelvis.

Narrow at Outlet Justo Minor, Male. Kyph. Roberts & Naegels

Brochounicles Diet:

To lessen size of fetus. Morning small cup of Coffee.

+ 3 ^{noon} 1/2 pint wine, med, eggs, fish, sauce, green
Vegetables, fat. Salad, cheese. Evening as for noon

+ 1 1/2 of Bread + Butter, fluid per day limited to 12-15 oz.

Red or Moselle Wine avoided. Dates, Soups, Potatoes.

sugar, creams & beer. A flat pelvis is where the Pubic bone
is higher & lies nearer the Promontory.

Feb. 27. 07. Face - 1 - 250.

Brow. 1 - 1800.

Assist. Delivery by	{	Breech Presentation -	{	- 50-60.
		In Dorsal ant. Position		Expressio fetas.
				Strong Del. efforts mother.
		Invert ^{assistent}		Sim. Lie Del. method.
				Wag and Martin ..
				Foreps.
	{	Dorsal Post Positions	{	above with rotation
				of trunk.

Breech Delivery Method.

Wigands:

Child rests on one arm, finger in mouth making traction with other hand press over Pubis.

Moreeaus:

Child rests on one hand, arm & other hand on child's back fingers over Clavicle. Supra Pubic Pressure by Anesth.

Prague:

Left hand to back of child the other holding legs near ankles. traction downward then upward.

Deventer:

In last manner make traction backward & downward.

Mar. 8. 07. Multiple Pregnancies.

13000000.

twins - 1 - 89.

Triplets - 1 - 7915.

quad - 1 - 371126.

100000 twins.

Boys 50000.

girls. 46000.

Br g. 54.000.

Twin Preg. Presen.

April 2. 07. Uterine mole (true & false) fleshy mass formed in & expelled from uterine cavity.

True - origin in & presents with Comp. parts
Products of Conception.

False is one which has no connection with Cora
Hydatidiform Pregnancy is a form where there
is degeneration of chorion. like Veno-thrust.

1 - 2000 Preg.

1. Haemorrhage. slight continuous.

2. Rapid growth of contents of uterus. Childless.

3. Passage of cysts from uterus.

Dangers: Septic Haemorrhage. apply Tr. Iodine. Cure

Post Partum Haem. have at hand.

Hot water. ice. Brandy. ether ergot.

Hypoderm. Syringe. Medicine. Gauge. fountain
Syringe.

Treatment. Preventative.

Remedial.

Danger: ~~Signs~~ previous. High pulse. - 100 per.
imperfect retractions. Other signs of blood.

Sym. Outflow of blood. No uterine globe.

Sym. & signs of severe haemorrhage.

1. Manipulation of uterus - pressure.

2. Ergot. 3. Irrigation hot sterile at 20-120°.

4. Tampon with gauze. Compresses & bandages
Keep bladder & Rectum empty.

Remedies against anaemia due to severe Haem.

may become indurated. may or passed 1 1/2 yrs.
Ovarian and endometrial.

28 to 30 in normally. Placenta site Prev 395
slightly.

Perph. Tr: Slow delivery 1 child.

Pressure on Uterus during & after delivery

Uterus failing to retract rub ice over hypogast.

Empty bladder. Ergot after delivery of child & Plac

Primary - during first 6 hrs. / Puerperium.

Secondary - after 6 hrs. Plac. site.

Causes: 1. Overdistention of uterus.

2. Retained Placenta.

3. Full Bl. & Rect. prevent contractions.

4. Weak Constitution.

5. Anaesthesia. Plac. Prev. Oxytocin etc..

April 12.07. Eclampsia:

occurs: before, after & during labor. 1-200-500 Cases.

Earlier severer.

Like Epileptic Convulsions & simulates several conditions.

Cause not well defined: is a Toxaemia, most likely arising from metabolism of Mother & foetus.

May be Creatin or other toxic products.

Toxaemia acts on Nervous system. Pathology like infection. Affects many organs Liver and Kidney mostly. 90% of cases. On Death Liver & Kidneys always affected. They contain Haemorrhagic spots & necrotic tissue. similar to ac. gal. atrophy. & Hyperemesis.

Prenatal signs & symptoms.

Urine:

albuminuria.

Tube casts.

Lessened urea.

Blood corpuscles.

Edema. Debility, frontal Headache, Nausea and vomiting late in Pregnancy. Contracted Pupils visual disturbances & Epigastric pain.

Spasm follows, eyes fixed. Stupid Dull Epileptic status. first signs twitchings of face Arms twitch, bites tongue.

Spit blood. coma, stupidity follows.

Spasms repeat & may be frequent.

Pulse 140. Respiration labored. Fever 104

Prognosis depends on severity. Die after
15 Conv. or fever 105. Primipara over 40 die.

Prim & Creb. nephritis die unless premature labor.

Lids. Lachrymal conjunctiva.
 Lower lid falling down & has them look up
 Upper ... by elevation ...
 Soft Rectus & Levator - Upper lid act together.
 Conjunctiva of Eye ball next. Inflam
 most pronounced at margin of Cornea.
 Para Corneal injection is indicative
 of Inflam within the eye ball.
 Reddish around edge of Cornea mostly
 Refr. Cornea - Normal transparency
 interfered with.

Focal illumination best use of
 McConner lens & in basis for examining
 Anterior Chamber: if normally deep
 foreign sub in a quiescent & type are
 conspicuous by their color, Pus. Blood etc
 are heavier & settle down.

Iris & Pupil.

Iris if inflam color is darker.

Size & Motility of Pupil. Light most
 important factor. Size varies average 2.5 x 4 mm
 young larger.

Movement of Iris. Shade one eye for
 5 min take of cover & watch contraction
 which is quick. Cold direct action to eye.
 indirect action is of fellow eye
 Corpora quadrigemina.



Iris.

Crystalline lens. May be loss of transparency
 seen in form of opacities examine by
 Oblique Illum. & Ophthalmoscope (Humboldt's)
 Concave mirror with perforation.

Direct Examination

Indirect .. is interfering Biconvex lens

Yellow Spot Macula Lutea

Feb. 7. 06.

Tension of Eye Ball. examined by touch.

T = +1 +2 +3.

-1 -2 -3

Motility of Eye. all movements are rotary.

1. each eye alone. then both together.

can be rotated about 50° in all directions.

" " " Laterally till cornea touches

Ext. Canthus. Internally " "

Canthula. Near point of convergence.

in young is 10-11 C.M.

Subjective Examination.

1. Exam.

2. " of Field of Vision

3

Periphery of Retina is 50 of Yellow Spot.

$$V = \frac{6}{6} - \frac{6}{9} - \frac{6}{16}$$

Test near vision + accommodation.

at 10 yrs = 14 dioptries. near point 10 C.M.

20 - 20 C.M. 40 - 36 C.M.

Presbyopia - weakness of accommodation comes on between 40 & 45. at 70 lost.

testing take age into consideration.

Vision depends on state of refraction & general condition of whole eye.

Field of vision tested with Perimeter white lights used.

Scotoma places in field where spot is dark.

White Black, Red Blue, Blue Yellow,

Complementary get same grey in each.

Maxwell mixing is rapid rotation.

Color blindness acquired or congenital.

Red green Congenital most frequent.

Yellow Blue.

Feb. 14. 06. Lachrymal gland under outer border of Orbital Rim may have inflammation or abscess formation. Treated as all " + abscesses.

Tumors Carcinomata, or Sarcoma fibrous composition. swelling pushing eyeball out of place caused double vision.

Incision along outer half arch don't injure tendon of Levator. Tumors usually encapsulated when removed Progn. good.

Lach. Duct. Canaliculi. Excretory Apparatus Puncta may be closed mechanically by foreign bodies. cilia, dust. may be congenitally closed. Treat. is to open it.

Lach. Sac. + Nasal Duct. Chronic Inflam + Suppuration + Chronic Dacryocystitis.

Swelling of mucous membrane + close junction to there is a contraction of submucosa lining causing stricture. most frequently at beginning + ending of duct. may be more than one.

tears accumulate in Lach. Sac causing extension can be seen. is usually in a state of inflammation may be mucous to pus. upon pressure fluid is seen thru Puncta + bag under thumb nail.

Gets in Cory. Sac + is inflamed when in lower + inner is indie to Lach. Sac.

Constant tearing. Do not operate when Chronic Inflam. of Lach. Appar. exists.

Treatment. 1. to get rid of inflammation

+ reduce any stricture

2. to get rid of any inflammation.

Probes are used No 1 to No 10 Lach. Apparatus. used flexible probes.

to Probe slit usually upper canaliculus

Make use of gradual dilatation

Let prob remain 15-20 or half hour.
 Suggest dust with 10% solution No. 10. Pte.
 When using another follow on prob
 in the mouth.

incl. syringe used to inject fluid
 & will cover only nose or wallowed.
 when flows out over cheek canal is closed.
 To reduce inflam in Nasal duct & Lach. Sac
 Use antiseptic solution with nasal syringe.
 Prognosis only fair. Entire Lach. Sac
 may have to be removed.

Fig. 16. Affections of Tarsus, free edges, Muscles.
 Free Edge. Chronic Inflamm. process (Blepharitis)
 down to the skin. Due to E. coli.

Squamous form resembling gray cap around
 cilia.

Ulcerous. Ulcers, small, under these cap
 & around cilia. Ulcers may be large.
 in children not well kept. Diseases of skin
 may complicate.

Treatment: Chlorine. Potassium Acid Solution
 when cracks set in with 1% solution.
 Nitrate of Silver but application 1% Sol.
 Antiseptic 2% yellow oxide. Marking of eye
 may be advisable to remove
 some, when the eye is open. Ulcers.
 Gradual cure when eye is out.

Sty acute occurs between cilia
 Tarsus. Chalazion, Retention of near
 sharp border of lid. may cause pain.
 Remove with may need. Sp. in
 inside & outside.

Leprosy. Epithelioma from free edge of lower
 lid usually.

Trichiasis any condition where cilia are
 going in wrong direction. may affect
 the eye. Will have when gets to eye.

Trid. is accompanied abnormal, curved
tarsus. Cause of Trid. is, thinning of
Conjunctiva. Granular Conjunctivitis
long standing Blepharitis
Treatment: 1. tract. & stay in to be in
recess of tract. 2. 4. for 20 days.

Feb. 28. '06. Ectropium lids standing away from eyeball.
lid becomes dry & redness of conjunctiva
most frequent on lower lid. Similar Ect. due
to relaxation & want of fat. caused also by
tissue of Conjunctiva, cicatricial tissue, & tumor
small in size according to causes of Ect.;
Eczema & Lupus.

Treatment: Different according to Cause.

Slit Canaliculus. Swollen Operculum.

Stretch thro' Conjunctiva & stay in on
cheek tightening every day. Some cicatrix
which contract back to place.

If elongated & very thin & of mucous body.

& Tarsus. When caused by cicatrix, transfer to
skin after cause has been removed.

Transplanted from mucous or to skin & lid to have
pedicle

Blepharophimosis. narrowing Palpebral fissure.
Cause is Granular Conjunctivitis

Blepharoblasty slit & sternal Canthus 1/2 to 1/4 in.

unite skin to edge of Conjunctiva to prevent healing
rounds of lids. & separating scar of Conjunctiva
from unite with lids.

Affections? Strabismus. Oculomotor: Spasms

tonic & clonic twitching require into habits.

Paralyzed cause tearing cannot be closed by eye
be injured treat. same as facial paralysis.

Ptosis affection of Elevator muscles Paralysis.

consequence of Paralysis. III Nerve

Congenital Ptosis due to want of development
most frequent unilateral

Treat by surgical procedure. stitch tendon down
to in drawing it downward

may substitute Corrugator for Levator.

Conjunctiva disease. 45 & 46

1. Iritis 2. Proptosis 3. 6 lines.

1. Simple 2. Puerile 3. granular or trachoma

4. Conjunctivitis, 5. Inf. Keratitis, 6., Phlyctenular.

Mar. 7. 16. Hyperemia Lacr. Conj. Mucosa of Lac. Tob.

Dust intraocular infection.

dryness of lids, unpleasant when closing.

No undue discharge in Hyperemia.

Mucous discharge & Puerile. mucopurulent.

Simple Conjunctivitis by irritation by dust etc.

most frequent to infection. Staphylo. Pneumo.

Diplo. more or less contagious

Catarhal Conj. may be in epidemics. In

mild forms is mucous secretion, sticks cilia

together, most pron. on Palp. Conj. of lower lid.

As a rule cornea is not affected.

Treatment: Cleanliness. remove discharge regularly.

Boric Acid 3%. or Puerile. Subconj.

Bichlor Hy. 1:5000 clear eye day or more

according to severity. To restore Conj

to normal use Caustic or astringent.

Caustic may produce Necrosis of upper layer.

Astringent

Alum weak.

Sulph of Zinc 1% sol.

Tannic acid. 1% sol.

Sulph of Copper. 1% ..

(Caustics) Stick. Blue stone

Silver salt Nitrate $\frac{1}{2}$ to 2% Sol.

Neutralize Nitrate of Silver by Silver Salt Sol.

Protargol { 5 to 20% produce less pain.

Arg. prot.

Catarhal Conj. Astringents sufficient

Purulent & when but if it is found Caustics
are used.

Chronic Conj. Caustics are used.

Purulent due to gonorrheal infection.
 Blepharitis of New Born takes place infection
 at birth. first stage is redness & in
 a few days thick purulent discharge.
 Upper lids swell found also in Diphtheria
 usually lasts 4 to 8 weeks. Very rare is case.
 lies in fact that cornea becomes implicated
 with ulcers. grows in diameter in beginning
 & enlarge rapidly. may destroy entire cornea
 & perforate cornea. If it H. may escape.
 ulcer never passes into sclera. If per-
 is rare in Diphtheritic Conj.

Treat. Cleaning of entire sac. by irrigation.
 with Boric acid. or Permang. Pot. (green)
 1 gr. in pint of water. If it & cornea swelling
 Caustic stronger. Nitrate of Silver. 2 gr.
 Application to Conj. applied 4 or 5 times.
 Once a day as a rule not oftener. Wait till
 previous scar has passed off.

Ulcers form don't cauterize. give some
 Aids to healing.

Blepharitis neonatorum due to infection
 of cornea. in infant. appears 3, 4 or 5 days
 after birth. Prophylaxis: be careful to wash
 both eyes with a tincture of iodine & drop in Bil. N.
 Close well up with clean paint. also D. Urticaria
 Granular Conjunctivitis (Trachoma)
 found in low altitudes. more severe in
 lower states. Path. 1. Enlarged conjunctiva
 which dies. becomes granular. becomes rough
 & granulated. Conjunctiva swells, becomes thick.
 clears up & is replaced by cicatrized tissue.
 later stages there is atrophy.

Chronic Conj. Acute Conj. becomes after a
 few days & becomes more purulent. upper
 lid swells not large.

Conj. red: swollen, Hyperemic. Then the granules appear.

Chronic Trachoma: Symptoms in the lid: swelling, irregular outline, large granules (Sago grain) in the conj. sac. Unusually, (No impairment of sight when cornea unaffected). Conj. Swollen conj. follicles. Mucous character discharge.

Trachoma treated early subsides in 7 to 8 weeks. very chronic disease. 10-20 yrs. may affect cornea + form pannus superficial patchy over cornea + formation. Bld vessels. from edge of cornea, between Bowman's Caps. & Epithelium.

Pannus found in the disease mostly from trachoma grows from above downward. A reaction to irritation of lid or an infection similar to trachoma may be formed on cornea not so progressive. On lids cause Entropion. Tarsus become affected & may cause turning in of lids. Trichiasis also present. follicles become smaller (Blepharophimosis). Treatment: P more content. Polishes, with creps } in Corrin. Caustic etc. Sulf. h. (Copper, stick form) or. 3 or 4 stone.

have edges smooth. apply to upper lid transmission, ever applied lid made of plication of lid on up and. one in 24 hrs.

2) Old at plication to counteract pain. Nitrate Silver 1% sol. Bicarbonate 1% may 1 to 500 makes a Caustic. 1 in 24 hrs. also where discharge is Purul. 1% Silver & Bich. are best. Change remedies occasionally. When ulcers appear Nitrate irritates.

Pannus Compaction, when small, no treatment necessary will clear up with disease. Excision part Cornea Ulcer. proper dressing. scraping necessary. Dilate pupil to prevent Strabismus. Lids bury lids to proper shape.

Blepharoptosis, widen tissue by previous described operation.

Croupoid Conj.

Croupoid discharge lies as secondary covering over conj. affects lower lids. After a week Membrane becomes loose & is cast off. duration two or 3 weeks. after membrane leaves mucous purulent discharge.

Benign disease. Cleanliness, & Antiseptics. Don't remove Membrane too soon. $\frac{1}{2}\%$ Sulph. Zinc. $\frac{1}{2}\%$ Nitrate of Silver.

April 4.06.

Diphtheritic Conj. is exudate in mucous membrane. usually on lower. Swollen lid is very hard. first stage watery discharge later Stage 2 Pus. Secretion. Gland in neck swell. Cleanliness. Antitoxin.

Phlyctenular Conj. Vesicles on conj. usually at edge of cornea. Contents yellow. often found in poor & malnourished children. Purulent discharge. Mucous discharge.

If you slide in from Continent. put into Conj with probe. Calomel for severe cases.

Tumor, cysts, carcinoma, Epithelioma.

Pt yjiun. grows pt is not up. of pt and Cornea usually goes from hard to soft.

Cornea when diseased power of refraction lost. curvature change.

Superficial & Interstitial

Ulcer serp. no conj. tis are present.

due to 1. injury. 2. infection. Pneumococcus & Staph.

Ulcer of Cornea is typical. may grow to posterior Chamber. & aqueous humor.

Ulcer healing if is pressed outwards.

Hyphema accumulation of Pus in Ant Chamber accumulate in lower part. Atrium brown in healing it. grayish color. thick white.

To. Quick progress. by sterilizing ulcers w/ cautery

Cocain 4% solution 1 drop in eye & close follow
in 2 or 3 min. & will anesthetize the cornea.
Cocain is not recommended in the U.S.A.

C is no. 1 also to as is cornea. Cocain
dilute up to 10. Puncta have been used.

Paracentesis of Cornea for typhoid treatment
Use stops when perforation formed.

Like warm applications.

Herpes Zoster. use application.

Dentritic Keratitis & Keratitis like this.

1. Apply antiseptic medicine.

Scars are too dark.

Staphylococcus vulgaris Cornea due to previous use.

Painful

Wondas
Dec. 11. 06.

Emetropic Parallel rays focus on Retina.

Hyperopic. " " " Behind.

Myopic. " " " in front.

Subjective:

Objective: 1 0

May 306. Acquired Cataract. { soft. cortical 40 to 60
hard . . . 60

Soft. (C) soft mass takes 2 yrs. to grow
Hard begins at center to the periphery takes
5 to 10 yrs. to mature.

In soft. int. Chamber becomes shallow.

Both eyes affected equally

Frequently associated with Diabetes Mellitus

Myopia

Treatment is surgical.

Decision. Incise Ant. lens & give
relief up to 10 yrs. (+)

Extraction

Comp. 1 soft. Decision.

Ant. & Post. Cataract no operation needed.

90% recover.

Apkaticia loss of length of eye

Eye red. lens 19.5

By adding Aduma lens may get into int. Chamber

Glaucoma disease Eye Ball

Increase intraocular tension. i.e. 3 degrees.

Cause int. atrophy in later stage 24%.

Ant. Chamber is shallow, Dilated pupil.

Inflammation this is only disease where
pupil is dilated with inflammation.

Excavation of optic N. due to intraocular pressure

Simple has no inflam. loss of sight.

2. inflam. symptoms and blindness.

Iridectomy for cataract allows eye
to grow out at normal place.

Pterygium horizontal growth over cornea is
 triangular in shape. More frequent to upward side.
 Nasal form most common. Many times no
 subjective symptoms. grow slowly.

Treatment: Surgical.

Dionin used in absorbing clot from
 subconjunctiva.

Keratitis.

1. Interstitial 2. Parenchymatous. Phlyctenular.
 Cause inherited or acquired Syphilis

Ry. Surgery.

Nov. 1. '86. Treatment of Prostate.

Reduction - Reduction, the anesthetic to
the contraction & tension of the
muscles of the body. The tension is
to induce carefully manipulate to produce
the following course of action in relation.

Advantages of Ry. Surgery

1. To the Injured 2. To the Ry. Co. 3. To the Public.
4. To the Profession 5. To the Ry Surgeon.

Distinctive Features of the Surgery.

1. The emergency character of the call.
2. The great care producing injury.
3. Infrequent litigation.
4. Social status of Ry Employee.
5. Collateral duties of Ry Surgeon
 - (a). Making Reports.
 - (b). Economical management of Cases.
 - (c). Physical Examinations etc. etc.

Description of Injuries.

Contusion. Bruise, wash. crushing.

Degree. mild. severe.

Effects: Hyperemia, swelling Echinacea. Extravasate
Gangrene.

Lacerations. Tears smooth, ragged

Incisions cuts by edged tools.

Fractures: Partial, Simple, Compound, Comminuted.

Sprain. Mild, severe, wrench. Disorganization of joint.

Dislocation Partial, complete, compound.

Internal injuries. Effects, Contusion, Ruptures, hemorrhages. Concussion, compression..

Contused & Lacerated Wounds Punctured wound, Stab wound

Gun Shot Wounds.

Oct. 22 '06

Report of Inquiries

Age. Color. Res. Occupation.

Date & Place.

Person calling Surgeon

Insurance

Dying Description. How caused - statement
Probably time of recovery. Any Blame attached.

Services

Examination of Eyes. Distances & Color.

Ear. Power of Hearing.

General. forms of Disability.

Nov. 5.06.

Fees of D.C.R.R.

Patient within limits of city or town where Physician resides. (Two Dollars) first visit if only ^{Medical Treatment} ^{Introduction Catheter.} ^{Stroke. Contusion} ^{minor cuts etc.}

Five Dollars { minor Surgical Op.
1. Amp of one or more fingers.
2. Fracture of Ribs.
3. Dislocation of Bones of Hand & foot.
4. Ligation of artery below elbow or knee.

Ten Dollars { Dislocation of ankle wrist or jaw.
Fracture of { Scapula.
Clavicle.
Forearm.

Fifteen Dollars { Amp above wrist.
Dislocation of Shoulder Elbow or knee.
Fracture of Patella - Femur.

Thirty Dollars { Amp at knee
Thru leg, foot, arm.
Excision of any of the larger joints except Hip.
Severe compound fracture of skull.

Fifty Dollars { Amp of Hip.
Amp. Shoulder.

one Dollar ^{for each} subsequent visit in all of above enumerated cases.

1. One Dollar minimum fee.

2. Office Consultation one or more prescription.

3. Minor Surgical treatment.

4. After dressing of injuries.

5. Opening of small abscesses.

6. Removal of foreign bodies from nose.

7. Vaccination.

8. Introduction of catheter.

Ordinary treatment of Eye & Ear.

Cauterizing Wounds.

After treatment of Ulcers or Pictura.

Small Burns or scalds.

Physical examination for lodges without Urinalysis.

Tongue tied.

Certificate of Disability.

Hypodermic Injection.

Chemical Urinalysis.

Two Dollar list: Ordinary visit. outside one per mile.

Treatment of the Rectum.

Opening Suppurating Abscesses.

Broughton of Blackleg.

Removing Embedded foreign bodies requiring Cocaine.

Incised or lacerated wounds not more than 2 sutures.

Exam. for lodges with Chem. Microscopy.

Ordinary Sprains.

Skin grafting.

first aid treatment of Burns.

Antiseptic cleansing of punctured wounds.

Three Dollars.

Minimum fee for night visits.

Life insurance with urinalysis.

Antitoxin injection.

High enema.

Phlebotomy.

Microscopically Examination.

Five Dollars.

Reducing fracture of fingers toes.

Small dislocations.

Treating wounds of five stitches.

Treating severe Burns.

Removing foreign bodies nose throat.

Small growths.

Deep abscesses.

Difficult Catarrh.

Professional Consultation.

Removal of Cinders or powder stains.

Chem. Micro Microscopy.

Night visit, unusual detention.

Operation for ingrown toenail.

Insanity Cases.

As Counselor as witness.

Reducing Hernia.

Tapping Hydrocele.

Exam. in Syph. & gon.

Severe sprains of large joints.

Removal foreign bodies. splinters etc.

Gun shot wounds.

Questioning Bladder.

Drugging Bladder.

Orchitis.

Cutting structure.

Anal Tapeworm.

Exam. & Micro. of Stomach Cont.

Dislocation of Patella.

Ten Dollars. Amputation of finger & toe with an.

Deep extensive lacerations.

Reducing nail foreign body per nail.

Deodorizing ear with.

Removal of wax.

Attending miscarriage.

Tapping.

Small growth removal with cautery.

Recent (accidents) summer.

Resection of lab.

Esophagus retractor in cont.

cluster of fingers

musculature

Muscular labor & work

tract leg. Paddle arm

Disloc. Shoulder or knee.

Polio.

Deliver Bows, fracs

tract of skull not depressed

Appendix of rib

Curvature

Pericardium

B 5 for the delivery

Difficult skull not complete fracture

Fracture of rib

Post mortem

20 line of joint amp. for arm et.

Comp. fracs of rib

Disloc. of rib

Wounds of Bows

50 Amp. Hinge Shows Hips

Severe Comp. Skull Fract

100 Appendix of St. 500. Gall Bladder

1/2 added for assistant. Above as Minimum

Emergency Bag:

splint - Plain - tressed.

Cotton 1/4 lb.

Bandages - 1/2 Doz.

Gauze 15 yds.

Rubber tissue.

Towel - soap - brush.

Tourniquet.

Adhesive Plaster.

Court Plaster

Bottles antiseptics, 50% Sal. ac. carb.

alcohol. Iodine Turp.

$As + H \rightarrow AsH_3$ or arsine.

Prep of arsine:

1. Arsenides + Nascent H.
2. Whenever reducible comp. / Arsenic is brot in presence of Nascent H.
3. By heated on Arsenides of alkali Metals.

Phy. prop: 1. Colorless gas.

2. Sol in 5 parts water free from air.
3. Easily inhaled & most poisonous / As. Comp.

Chem Prop of AsH_3

1. Neutral in reaction.
2. In air its H is reduced by oxygen.
3. In O. it is reduced to metallic As.
4. Burns with bluish flame $\rightarrow As_2O_3$
5. It decomposes as H₂ slowly $\rightarrow AsH_3$ or AsH_2
6. Oxidizing agents decomposes readily.

As + Halogens: Forms Comp with all.

Donovan's Solution. Liquor arsenic Hydraz.

$As + O \rightarrow As_2O_3$ & As_2O_5 or arsenic trioxide

Arsenic Pentoxide

As_2O_5

1. By roasting native Sulphides / Arsenic with Charcoal in current / air.
 2. By burning As in O. or in air.
- Phy & Chem. Prop:
1. 3 forms. Crystalline. Vitreous. Porcelain. (Glassy)
 2. Heavier than water yet it floats due to fact that particles of air are attached to surface.
 3. It is called white As. in Commerce.
 4. Impure form is Ron Rats.
 5. Sweetish taste.

Chem. Prop:

1. Sol. in water is acid $\rightarrow H_2AsO_4$
2. Neutralize by bases \rightarrow Arsenites.
3. NaOH dissolves it forming Na arsenite.
4. Readily reduced \rightarrow metallic arsenic.
5. Oxidizing agents convert it into As_2O_5 .

As_2O_5 - arsenic Pentoxide:

Prep. 1. Heat As to redness in O or air.

2. Oxidizing As_2O_3 .

3. Burning As_3H_3 in excess of O .

Prop: Phys:

1. unphosphorus powder.

2. Colorless - white

3. Dissolves in $\text{NaOH} \rightarrow$ arsenate

Chem:

1. $\text{As}_2\text{O}_5 + 3\text{H}_2\text{O} \rightarrow 2\text{H}_3\text{AsO}_4$ (arsenic acid)

2. Can be reduced giving metallic As or As_2O_3

3. It is anhydride of arsenic acid.

Arsenious acid.

1. formed by dissolving $\text{As}_2\text{O}_3 + \text{H}_2\text{O}$.

2. Liquor arsenious acid = 1% sol. As_2O_3 in HCl .

3. Fowler's sol = 1% sol. of Pot. Arsenite.

use $\text{As}_2\text{O}_3 + \text{KCO}_3 \rightarrow \uparrow$

5. Scheele's Green \rightarrow Cu arsenate.

4. Paris G. \rightarrow Comp of Arsenite / ~~the~~ Arsenate, Cu
Arsenic acid or H_3AsO_4

Prep: $\text{As}_2\text{O}_3 +$ oxidizing by mix of HNO_3 & H_2O .

Prop. 1. Colorless - slightly liquid.

2. May become semisolid.

3. Mdy Crystalline. Crystals are deliquescent.

4. In presence of H_2S , H . $\rightarrow \text{AsH}_3 + \text{H}_2\text{O}$.

Compound of As & S . same as native forms.

Poisoning by Arsenic:

1. Usually taken by mouth.

2. Metallic or elementary As is not poisonous.

3. AsH_3 is most poisonous of all Comp.

4. As_2O_3 is form most frequently used. crystals may be irritating to stomach.

5. K. Arsenite often used in poisoning.

6. Na " used to clean vessels, food or water taken from such vessels may cause poisoning.

7. Arsenides & arsenic.

8. Sulfides especially may cause poisoning.

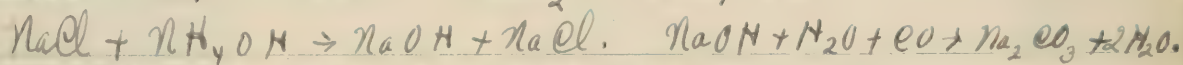
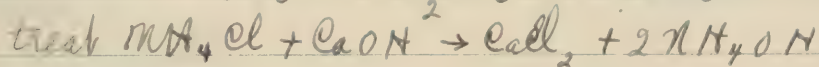
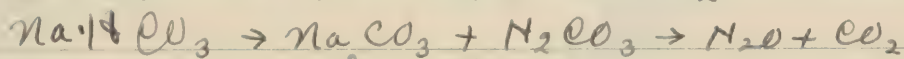
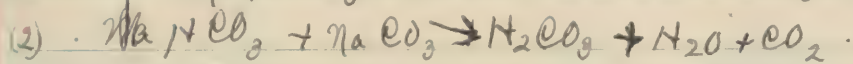
7. Scheele's green
 10. R. on R. - Paris green.
 11. Pigments from green shell paper.
 12. Some green colored candies.

Test Spot.

- Jan. 24.07. 1. Volatilization Sb. 440° as 1000° .
 2. Sol. as sol in Na. Hypochloride.
 3. Place deposit in tube & make mirror test.

See Arsenic Tests?

Feb. 6.07. Carbonic Acid H_2CO_3 unstable. 2 Salts. Na_2CO_3
 $NaHCO_3$ Bicarb. $Na_2CO_3 + H_2O + CO_2 \rightarrow Na_2CO_3 + 2H_2O$
 Leblanc's & Solway's method of prep. Na. Carb. $NaCl + H_2SO_4 \rightarrow$
 $Na_2SO_4 + 2HCl$. Hine off HCl. mix remainder with C. $\rightarrow CaCO_3$
 $Na_2SO_4 + 2C \rightarrow Na_2S + 2CO_2$ $Na_2S + CaCO_3 \rightarrow Na_2CO_3 + CaS$.
 $CaS + O \rightarrow CaSO_4$ & is insol & reked out into water & CO_2 absorbed.
 Solway. $NH_4HCO_3 + NaCl \rightarrow NaHCO_3 + NH_4Cl$.

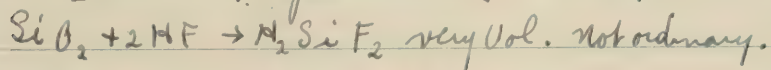
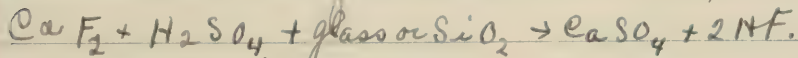


Carbon Bisulphide CS_2 heat C + S $\rightarrow CS_2$

Prop. Lig. heavy. peculiar odor. best solvent for S & P. Poison to inhale.
 C + N \rightarrow Cyanides or CN_2 gas. Pungent odor. Poisonous, can lig.
 burns, with blue flame gives KCN. (Prussic acid.) Prep. $KCN + H_2SO_4$
 $\rightarrow K_2SO_4 + 2HCN$. Prop. colorless lig. taste oil / Bit. alm. Poison

Prep KCN. $KOH + HCN \rightarrow KCN + H_2O$. Toxic. Most poison. Sym. falls
 at once, dizzy, nausea, Resp slow. Wt. weak & stops suddenly. Antidotes.
 No time. Art Resp. affects ties so they can't take up O.

Silicon Si. 28. fine comp. SiO_2 Imp. constituent of glass.



Feb. 5.07. Antimony. Sb. 120. occurrence as sulphide

Prep. roasting with Carbon Prop. a metal.

Stibium SbH_3 Prop. that of a gas. Prep. same as antimony.

Tartar Emetic or Pot. antimony tartarate Prep. Boil 3 parts of

Antimony trioxide with 4 parts of Cream of Tartar.

1/2 Sb. O 4 1/4 0 6 Dose as Emetic + 2 gr. Expect. 1/8 - 1/6
 Poisonous sympt. on overdose & long cont. dose.

Bismuth. Bi ^{at.w.} 207. occurrence as Sulphides. roach with Carbon. Prop. Metallic. Most important Bi Subnitrate. Bi Subcarbonate. Bi Subgallate = Dermital.

Carbon: C. at.w. 12. occurrence - Diamond.

Graffite. Hard & Soft. Coal. allotropic forms.

1. Diamond - no ash. 2. graphite - 5% ash. 3. Amorphous coal. Anthracite Coal 98% Bituminous 70-80.

Peat small %. Lamp Black pure. from incomplete oxidation Animal Charcoal. Coal gas is made by destructive distillation of Coal. Illuminates: Ethylene C_2H_4 Propylene. Butylene. Antylene. also $n.CO_2.H_2O$.

Water gas prep. by passing jets of steam over carbon in form of coal heated to redness: $C + H_2O \rightarrow CO + H_2$. Constituents 1. H_2 . 2. Carbon. 3. CO_2 . Water gas.

Carbon Monoxide Prep. 1. burning incomplete oxidation. 2. Oxide + H_2SO_4 + Heat. Phys. Prop. Colorless, odorless, tasteless. Burns with blue flame. Nearly insol in water. Reduces. Phys effects. Narcotic, Dizziness, Headache, nausea. Mental Dullness, Coma & Death. treatment Est. Resp.

Remove source of Poison. Supportive. 1. H_2 . & Resp. Stimulant. Inject Saline Solution.

Mar. 11.07. Paraffins: Saturated Comp. stable.

CH_4 Methane. Marsh gas Illuminating gas from decomp. of Organic Matter.

Fire damp is Mixture of O & CH_4 .

CH_4 Methane.

C_2H_6 Ethane.

C_3H_8 Propane.

C_4H_{10} Butane.

Petroleum: crude oil

Kerosene: from ... is that part which distils between 150 & $220^\circ C$. Treated with 2% Sulphuric Acid. takes out unsaturated Hydrocarbons. add $NaOH$ to neutralize acid. Redistil.

Benzene mixture of Paraffins C_5H_{10} C_6H_{12} etc.

Glanser. rubber etc. - Passes off first gas alone next.

Petrolatum Lig. is heavier
alcoholic.

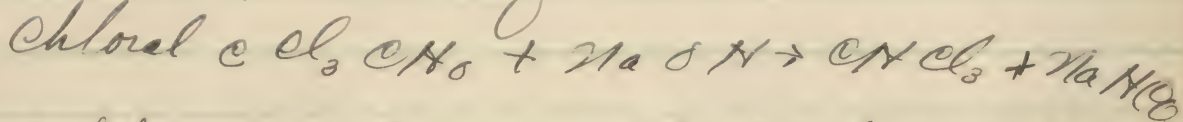
Vaseline. remains.

Paraffin.

Substitution product Methane.

trichlor Methane. - chloroform.

Prep. Commer. treat acetone CH_3COCH_3
2 acetone + Chloride of lime.



Mar. 18. 07. Alcohol. water where 1H is replaced by hydro Carbon.

monatomic - $\text{C}_2\text{H}_5\text{OH}$

Diatonic $\text{C}_2\text{H}_4(\text{OH})_2$ glycol.

Triatomic $\text{C}_3\text{H}_7\text{OH}$ glycerine.
 $\text{C}_3\text{H}_7\text{OH}$

I. $\text{C}_2\text{H}_5\text{OH}$

II. OH attached to carbon which in turn attached to
 $\text{C}_2\text{H}_5 - \text{CH} - \text{C}_2\text{H}_5$
OH.

III. OH to C. which in turn to 3 or more C atoms.
 $\text{C}_4\text{H}_9 - \text{C}(\text{OH})(\text{CH}_3)_2$ isobutyl alcohol.

Primary alc. when C. yield aldehydes.

Secondary " " " Ketones with same C.

Tertiary " " " Ketones with less C.

Distilled { Brandy.
Whisky.
Rum.

Malt. Beer. 3.5 - 4.5

Ferment. wine. 15 - 20

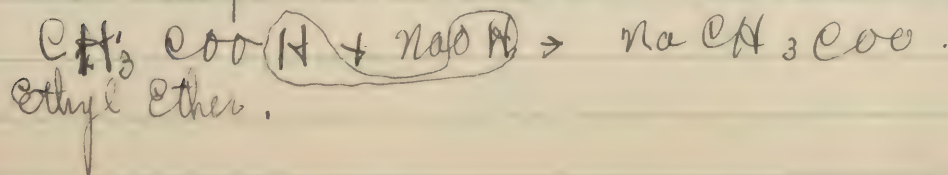
Champagne - Carbonates wine.

Compounds obtained from alcohols by dehydration.

Ethers 1. Simple. - when Radicals are same.

2. Mixed " " different.

3. Compound or Ester: alcoholic radical + acid radical.



Mar. 1.06 Proencephalon.

Medulla

Rhomb

~ Axillary Neuron to Post. C. Col. J. Burd to
 ~ Dendrites (Per) Medulla & thence to parts

of Brain.

Motor ~ Cortex.
 ~ Primary M.

Ant. Cord
 ~ Muscle.

Afferent or Sensory { Pain
 Special Sensation { Thermic
 { tactile intact to
 { muscular + articular sense.
 { smell, sight, hearing taste

Exit to Reflex

Effluent Motor to Vol. Strips Mus. Vasc. Cn.

Secretory.

Inhibitory

Cirbro Sp. Mech. Visceral Mech.

1. Psychic.

1. Secretory.

2. Sensory.

2. Troph.

4. Voluntary Motor.

+ Vasc Motor.

5. Reflex.

Ant. Lat Post. Col.

Post { qual
 { Burd.

fibers entering cord Post divide into
 Ant + Desc. ends some pass to Ant. Horns

~ ~ ~ Clark's Col.
 ~ ~ ~ most pass to Med. Mus.

J. Burd in MD.

From Clark to Direct Cereb. in tr.

~ ~ ~ some go to J. w. (Heat track)

~ ~ ~ cerebral.

Ant. Cord.
 ~ ~ ~

~ ~ ~ Direct P.

is conducted normally, motor has under-
 stood individual. In the motor
 of above spinal character. They must
 Expansion, Resp. p. 1.

Athetosis. peculiar form. Character of slow
 successive rotation, flexion, pronation
 & supination of hand. Arm or fingers
 the & etc. rarely seen in waking
 except at short times.

Contractures.

1. functional - due to contracture -
2. Organic - in facts.

Associated Mov. either a unit occur
 involuntary when opposite side moved.

Hemiplegia. Half body paralyzed

Para " two lower limbs

Paralysis partial paralysis.

Reflex - a motor response to sensory impression
 1. involuntary

4 kinds -

1. superficial. 2. tendon, deep, 3. 4. Schopshire
- or limb.

Sensory functions along to nerve for pain
 & sensation. may be deflection or loss
 increase or preservation of sens. funct.

Anesthesia or taste

Analgesia loss of Pain

1 " " " " " " " " " " " "

Muscles sense to Pain & Sense.

Ataxia loss of sense - muscle

Disturbance of Muscles - no is seen motor & in
 direct & coordinated movements are made possible.

Static ataxia loss of equilibrium. disturbance an
 more muscular.

Coordination is perceived by repetition

Defective - disturbed in coordination

Ataxia ataxia.

Astereognosis - loss of sense of form
 Hypoesthesia - decrease sense of touch.
 Hyperesthesia - increase sense of touch.

Analgesia - loss of pain sense.

Hypesthesia ..

Hyperesthesia ..

Paresthesia - loss of all motor general sensation except pain.

Relaxation - more relaxed & open to receive more sensation.

Relaxation - more relaxed & open to receive more sensation.

Microchromia - loss of sensation.

Reflex to opposite side.

Atropia - at the joint.

Acromegaly - disturbance of Pituitary.

Angio Meliosis

Simp. p. rated gait

Hemiplegic ..

Spastic gait both side of to.

Step gait - raising leg to raise toe.

Rhomboid ..

Argyll. Roberts Pupil does not respond to light.

Testing .. have patient ..

..

..

..

..

..

..

Reflex motor response to sensory input.

Lesion of pyramidal above center. Reflex are

caused by

St. irritation in sensory tract

Certain drug - lycium ..

..

Lesion complete transect Reflex.

Oct. 5. '6.

D. Schenk. Oppenheim. Day new.

Progressive Bulbar Paresis. a rare progressive
degeneration of 12. 11. 7. Motor nuclei of 12. 11. 7.
Appropietic - very fast. rare. Degenerated nuclei.

Pseudo. not in med. rare.

My. Thania gravis no change in Post Mort.
very notional.

not com. ant. of each nascent. got tired. speaking
could not swallow well especially liquids.
which came thro nose.

Phy. Ex. 11 mor / long as. no 1. sensation

Pro. Supp. little can be done. Prog 185 yrs.

Path. Degeneration of Nuclei 12. 11. 7. in floor of mouth
& 12. 11. 7. of Nuclei with gray degeneration & atrophy
of nucleus. 12. 11. 7. from 12. 11. 7. there is an
atrophy of 12. 11. 7. of 12. 11. 7. & tongue.

Oct. 7. '6.

Mental Diseases. Mind is experience.

sensitiveness, choice, & movement.

Intelligence.

Spoken Language Sup. Temp. Loco. Contr.

Written .. Angular Gyrus.

Inferior Frontal for muscles of speech.

Sensation underlying element of mentality.

Intellect - think

feeling - ^{emotion} motion

Will - regulates actions

Insanity is that state of mind in which the

subject is no longer able to keep Temp.

or Perm. to draw logical conclusions in

accordance with age, race, education etc.

Illusions & Hallucinations. Delusions are prevented
in Insanity.

Delusions is an error of judgment out of which
f. can not be reasoned.

Illusions are faulty interpretations of sense with
Physical foundation.

Hallucinations is a Presented interpretation without
Physical foundation.

Oct. 11.06 Schwab: Inorganic or functional no chance in Bot. Mata
Tic. general movement purposeless in character.
in groups? Muscles or single.
Bilateral Tic

Chorea differentiate.

Treatment of Tic is Physical treatment.

Bell's Palsy.

Reaction of degeneration present in Periphery.

7 only in Peri.

3 Branches " "

Tabes Dorsalis.

Oct. 16.06 Chaddock. Insanity { functional.
Organic.

1. No Path. lesions. no signs of inheritance or organic.
follow shock. accumulation of Poisons. Uremia.

Melancholia & Mania: Simple Insanity.

2. Anatomical changes in Brain substances.

Syphalytic causes. Alcohol. Lead. Deposits in Meninges -
Tumor, Uremia, Diabetes. Thyroid Diseases.

3. Due to Mental instability! inherited. May be due to
defective conformation of Skull. Change in convolution
or arteries. In this type there is recurrence, Periodicity.

Remissions with relapses. Prodromal state, delusions.

Absence of Cause. except degeneracy.

form Periodic, recurrent, 3rd Neurotic.

4. Due to arrested development, glandular deficiency.

Cerebral hemorrhage.

Treatment of Melancholia: Inhibition of Mental & Physical
activity out of all proportion to cause. Symptoms. Depression
& inhibition of Mental activity. Cause: emotional &
Physical. Phys. Disturbed Nutrition of Brain. Stomach is
secondary. Depression always present & monotonous.

Simple, & Mel with delirious. Del may be Moral & Hypochondria.

Active or Passive. Symptoms: Mental distress & depression in
uneasiness & expression of grief. Sluggish liver, defective Stomach

Constipation. Urine loaded with Phosphate & Indican
Slap disturbed. Speech slow & monotonous. Bradachia
Neuralgia. great Agony.

Prodromal symptoms of apoplexy.Oct. 1906.
Schwab.

one sided Paresis. loss of good use of Muscles. TB. 3 yr. ago.
Numbness of fingers. Make careful Physical Examination
Careful History. Must be some lesion of Heart.
Hemorrhage. Embolus or Thrombosis cause ^{apoplexy} Stroke
Valvular disease may cause it by Embolism.
Softening from Infarct.

Hemorrhage from arterio-sclerosis into Brain (Spinal.)
Thrombosis from Slowed current.

Nephritis may exist with Arterio Sclerosis.

Treatment Nitro Glycine & K.I.

Second Aortic Slightly Accentuated. Examine Urine.

Oct. 25 '06.

Paresis, general Paralysis of Insane. Dementia Paralytica
Unequal pupil, fixed Pupil. Double Vision. Opthal -
Slight Paralysis of Out Rectus.

tabes. Syphilis ^{possible}. Optimism.

Nov. 2 '06.
Horse

Horse faints in front of me.

Symptoms may follow Hemip. Apoplexy.

Shall check. Huntington type of family degeneration.
Watch symptoms carefully.

involuntary, jerky, spasmodic. In time, probably
will be. Also cloudy & thick. Urine. Urine.
Endocarditis

Examine Heart. Both will cause degeneration of the body.

Post Sept.
Nov. 1906.

Analysis depending on depth of disease.

Nov. 9 '06.

Paranoia?

Nov. 13 '06

Neuritis. Inflamm. more particularly degenerative. structure of Nerve.
Post Column. & Peripheral Nerve same substance.

Nov. 15 '06

Cerebellar Symptoms. Ataxia. may be caused by tumor.
^{referred} Friedreich's Ataxia. is an hereditary Ataxia
Alcoholic Neuritis most common.

Complains of abnormal sensations in lower Extremities. Cotton pads.
Feet hurt in walking. Hypersensitiveness. lancinating character.

Pain slight or severe. increased on pressure or movement.

Weak in legs. calf muscles extremely sensitive. Anesthesia of
touch. Muscles are flabby & soft. wasting of limbs.

May be masked by redness. fat may obscure. foot drop ant. muscles
 of ^{leg} ~~thigh~~ involved. Reflexes are reduced or absent at knee & ankle.
 Paralysis is rarely complete. muscles are unequally paralyzed.
 Reaction? Degeneration present. indicates nerve is undergoing
 degeneration. Muscles of forearm & hands. Ex. wrist. P. & Muscles Sp.
 N. ^{muscles} mostly affected. May begin in hands first. As a rule
 Neuritis develops symmetrically. upper & lower. Calves
 toe touches fist - takes heel. Distal. Bladder & Rectum
 rarely involved when so there is more than a Pure neuritis.
 Cold must be involved. sometimes Optic Neuritis. Heart action
 may be involved. develops slowly. in regression some muscles may
 contract forming deformities. (the calf muscles etc). Some
 delirium. dullness. loss of memory & certain facts. Recovery slow.
 Women more susceptible. Treatment: get rid of alcohol. protect
 affected limbs. Keep warm. keep feet in proper position.
 Massage & Elect. Nourish patient. Relieve pain. Watch heart.
 Application of Strong current paralytic no pain noticed in Tabes.
 Bladder involved in Tabes also gives pains - a good Retention of
 Areas on surface correspond to Root centers in Tabes. atrophy
 is a final result.

Nov. 27.06. Lead common cause of degeneration of nerve. Degenerative Neuritis.
 Preceded by other symptoms. May be first. Usually begin in
 upper extremities the one most employed usually. Atrophy
 development is slow. weakness in extensors of fingers & hands
 causing wrist drop fingers are flexed at same time - Supinator
 longus escapes. May go further & involve flexors. Triceps escapes.
 atypical type may involve Biceps & Deltoid. Muscles involved
 show twitching. later may be reaction. Degeneration. No disturbance
 of sensibility. No paraplegia. Lower extremities may be involved going farther
 Prognosis: If P. is removed from lead is good. Treatment: get rid
 of Poison use K.I. ^{may say} Open bowels. Use Diaphoretics & treat symptoms.
Arsenical Paralysis May come on slowly after acute poisoning
 Premonitory Sym. Pain & peculiar sensations in hands
 feet at same time. Weakness followed by atrophy. Parts affected by
 preference are Peronei of legs & Extensors but flexors have
 less than in other two diseases. Sensitiveness to pressure
 makes to pressure. Anesthesia. Ataxia gress.

Reaction / Regeneration. may resemble Tabes. dif. early indication / atrophic Reaction / Deg. Prog. good recovery in mild cases in a few weeks. otherwise long.
 Diphtheria is a paralysis depending on action on peripheral nerves. 2 varieties: Local & general. May follow mild or severe case / Diphtheria. Paralysis occurs a few weeks after convalescence. Common location is in soft palate which becomes motionless may be involvement of Ciliary muscle. but no loss of reflex to light. Abducens may be involved. swallowing may be interfered with. Recurrent Laryngeal may be involved. Cardiac nerves may be involved. Involvement of Extremities comes later others may have disappeared. May be limited to low / Deep reflexes. This may go further & give rise to deg. change in nerves. History good in differentiating. Bladder & rectum not involved. Prog very good as a rule. may be slow. Prog of General Neuritis depends on extent & involvement of Brain & Cord. No sensory involvement in Infantile Paralysis except in beginning.

Treatment of Neuritis in General is to sustain vitality support to prevent deformities, anodynes. use of Electricity Blisters / Massage where patient can stand this.

Dec. 4.06 Tabes Dorsalis - Post. Spinal Sclerosis. - Locomotor ataxia. wasting / Post Cord. disturbs motor & sensory systems. Causes is Syphilis. In children Hereditary. Dementia Paralytica. about same only affects Cortex of Brain. Time 1 to 35 yrs after infection 5 or 6 as a rule. 10 times as frequent in Men. same as syphilis. Affects nearly all parts of nervous system. Sensory especially. Sensory symptoms first appear. 1. Pains in legs - lightning - come & go. occur in Paroxysms. 2. girdle pain. 3 Crises are pains. in various Organs as named Gatriete. very common. 4. Pads under feet. 5. Sensation of Creeping over skin. 6. Distinction of Pain sense. This analgesia may affect skin & deeper structures. 7. May be hyperaesthesia. 8. frequently show Retardation of sensation. 9. May be dissociation. 10. Inability to locate impression on surface. 11. Sensibility in Muscles & joints is lost & Patient cannot locate position. 12. Loss of Reflexes. Action may go first. This is a slow process. Interruption of Reflexes are causes loss. Post Roots mostly affected. Loss of tonicity of Muscular tones.

13. Transitory ocular palsies quite common. Ptosis also common. Pupillary symptoms are early & quite common (Argyll Robertson). At first sluggish. Myosis. Small pupil due to involvement of cord in upper dorsal region. That is sympathetic does not supply the Motor oculi.

Jan. 4.07
Phedlock.

Deg. 1 Peripheral Sens. Gang. Optic atrophy is ~~in~~ ⁱⁿ ~~the~~ ^{the} ~~cord~~ ^{cord}. May be involvement, atrophy of cells of Ant. Horns. Also lateral tracts. One at times involves. Belt of Hiperesthesia at nipple line. May extend all round or part may be wider on one side. This has a root distribution. This point is practically line of roots. Rhombencephalon May be unilateral.

Paralysis of one or both vocal cords.

Tubercle or Charcot joint. rapid swelling with no indication for it. Joint may be swollen joint may be very loose. Don't open joint.

Perforations which usually are felt rather than pressure. ~~Perforations~~ ^{Perforations} ~~at~~ ^{at} ~~the~~ ^{the} ~~base~~ ^{base} ~~of~~ ^{of} ~~the~~ ^{the} ~~cord~~ ^{cord}. Muscles may be affected by involvement of Ant. Horn. which probably switches go to show.

Multiple Sclerosis may simulate.

Cerebellar Tumor

Jan. 11.07.

Injectors / Calomel treatment / Babansky.

No treatment only to check trouble.

Sit patients on table & bend body for nourishment of Cord. Reeducation. Loss of muscle tone cause Contrind- Pain - don't give Morphin. $2\frac{1}{2}$ gr. ^{aa} Antifebrin Phenacetin 100 Nitrogly. $\frac{1}{16}$ gr. ^{aa} mixed with Comp. Licorice Powder. 3 doses - 15 min apart & long rest / few hrs. 4 or 5.

Morphia hypo. for gastric Crises. Electricity not very good good Hygiene etc. May not go very fast. Keep up hope. $\frac{1}{4}$ to 1 gr. once a week suspended in Olive oil in Buttocks give only 3 wks. Begin large dose of Iodides.

Combined Post & Lateral Sclerosis. Ataxic Paraplegia in a person with weakness & ataxic.

Inflam. cord diffuse may produce this.
May occur from vascular interference. Caused
by invaded elements which don't belong there.

Friedrich's Hereditary Ataxia.

Involves Post & Lat Pyr. Cerebellar & Gowers
tracks. Poor Embryonal development.

Reflexes may be exaggerated. Symptoms not so severe
as in Tabes.

Tr. May use actual Cautery along spine in P. L. Se.

Friedrich's affects members of one family. Comes
on early. is developed in Mother. Mostly Males.

Undersized cord & Cerebellum mostly. Atrophy of Cerebellum
alone not cord in some cases. - Marie's Disease -

Jan. 13, '97. Staggering stumbling gait. Not a true Rhombism.
Constant moving.

Very few sensory symptoms.

Deep reflexes are lost early. Exaggerated
in Cerebellar form. Sphincters not involved with.

Nystagmus jerking Eyes. Difficulty in speech.

Atrophy of optic chiasm in Cerebellar type. anomalies
of Papillae in the form. Face blank. Two deformities
lateral scoliosis. Club foot: increased plantar
arch & hyperextension of toes chiefly big toe.

Disease progresses slowly.

Simulates Multiple Sclerosis. Refers to exaggeration.

Amiotrophic lateral Sclerosis. (Sharkot)

Involve Motor cells / Ant-horns. Disease

begins in Cerv. & goes down & upward.

Lateral tract first. Exag. reflexes. spasticity.

Atrophy. Hands chiefly involved progress rapidly.
1-3 yrs.

Syringomyelia.

Infantile Paralysis. acute ant. Polio Myelitis.

Young Children, P. M. Intense Cong. in all cord.

Gray Columns. later foci of destroyed gray matter
scattered about. Begins as a fever. may become
paralyzed suddenly all extremities or some.

May be hemiplegic. Likely to be pain - joints -
after a day or two there are no sensory symptoms.
Atrophy develops slowly. Cong. recedes.

Response to Faradic current usually lost in 10 days
others may recover. There is Reaction of Degeneration.

Jan. 25.07. Infectious in character. Sphincter relaxed.

The galvanic response in muscle.

Reflexes are lost in those connection of at. Muscle
Motor & trophic affection. Regression after
some time. Muscles of R. & D. doomed.

Affects all structures. Affects limb smaller etc
Lower limbs mostly affected. Extensors mostly.

Hand extensors & Deltoid mostly. S. Long & B. 100%
Nuclei in Medulla are involved.

Cerebral Palsy is Hemiplegia, spastic. Reflex Ex
False Sympliciter Paralysis: Lack of union of
epiphyses & Diaphyses of long bones.

Birth Palsy: Deltoid. B. Brach. Coraco. D. Spina
Root. Prog: good if Med. is not involved.

Massage & Electricity. Prevent deformities.

Duchenne-Aran: Atrophy. Vasc. supply
ant. Cord. involving Motor Reg. ant. horn. (

May be due to Syphilis. Hereditary in Cases.

Involvement of Upper extremities. Disturbance
fine movements of hands first. Habitual movements.

Feb. 7.07. Prog. Sp. Musc. Atrophy Small Thenar Em. then interossei
Lumb. & others. Peculiar cont. of thumb. Claw hand

allow space between bones. affects other hand then Deltoid.
forearm etc. May progress slowly. Usually Lower Cervical.

Sphincters escape. No sensory disturbance. Weakness proportion
to atrophy. Usually Contradiction affection of cells of Cords.

Reflexes are diminished H. jerks & A. Muscles easily fatigued.

Too tight bandaging causes change in Muscles.

Charcot's exag. Reflexes. Syr. My. Sensory symptoms
Rest. Massage. No treatment. E. & D. 100% Symp.

Syringomyelia. Abnorm. Swifty in Sp. Cord.

Symptoms depend on location not process. Lesion in Gray Matter Post to Lat. invading Post horn & Ant. H. & by pressure involve W. Matter. This is course of sensory & Motor & Spastic. Low. Cerv. & Up. Dorsal.

Dist. of Sens. Pain Retention of touch. Dissociation Sens. Neurons. May be exag. of Deep Ref. of Low. Ex. Morgan's.²

Feb. 28. '07. 1 Emotional insanity Depression. Exaltation.
2 Intellectual ..

Mania or Delusion is rapid change of thot.

Melancholy monotonous one line, predominate thot.

3. Primary Delusional insanity.

4. Delirium incoordinate dreamy hallucinations not aware of surroundings etc. this prolonged is hallucinatory or confusional insanity.

5. Dementia acuta. Primary acuta elaboration of all thot.

Functional insanity

Physic degeneracy a cond. of development Ment. & Phy which leaves the individual short. in comparison to his race.

Degenerative vary from simple in form. cause etc. Paranoias - Delusional insanity -

Mar. 7, '07. Dementia Praecox. early & rapid failure of mental faculties. 14-23 yrs. (Hebephrenia) (Insanity of Puberty).

Cataleptic resist all movements. & retain certain attitudes. delusions are not systematized. few cases recover. Cause defective nervous state.

Alcoholic Insanity. organic. general Bld change in brain no cure.

moral & Intel. symptoms. outbursts of rage on emotional side. frequent depression & suicide. weak memory progresses to dementia. leads to abuse. delusion of persecution tremor etc. Cramps in Calves - Muscular weakness. Chronic.

Melancholia due to alcohol. short duration.

Hall. 3 sight & Hearing.

Opium is useful in treatment. Ac. Mania is grave.
 Temporary insanity Hall. of hearing. may commit murder.
 Syn: Use History. Anesthesia, Lower Ex. Pains. grand Delusions. etc.
 general Paralysis Lym. of Cord.
 Ac. Epilepsy.

Mar. 17. 07. Myelitis. Inflamm. of cord. cross destruction.
 May have laceration from Haemorrhage.
 from affected parts we have an ascending & descending
 degeneration. may have pains darting down limbs.
 Girdle pains. numbness below lesion. disease progresses
 & patient becomes paraplegic. loses control of
 bladder & rectum.

Hypersensitive at line of demarcation.

Complete lesion loss of reflexes.

Babansky's indicates organic lesion of motor
 track & early. tendency to bed sores. Best prognosis
 when Dorsal region is affected.

Tr. Mercury in large doses. See over spines.

add one ^{spine} ~~vertebra~~ in Cervical for segment.

1 to 6 Dorsal add two

6 .. 11 3.

Level of nipple - 5 Dorsal segment.

.. .. Naval - 9-10

Perineum & Coccyx to lowest part of cord.

Mar. 28. 07. Multiple Sclerosis.

Insular. Disseminated. Sclerosis en Plagues.

May follow infectious fevers. - age 18-30.

May occur in young. Rather diffuse plaques

may be large or small or irregular. found
 mostly in the white matter. May affect the

optic nerve. by several plaques or large ones
 intruding. Spastic gait; stiff & staggering.

Intention tremor may affect whole body. pure

Cerebellar gait staggering not spastic.

apoplecticiform & epileptiform seizures.

Reflexes exaggerated. foot clonus. Babansky

sign very common.

May be interference of higher center senses. Slight atrophy of Optic Disc Extramural or temporal segment Ext. Ocular muscles are weak. May have irregular myopia. Myotomas common. May have gastric crises trophic disturbances rare may have mild muscular atrophy but is usually late. Glycosuria probably from irritation around 4th ventricle & in region of medulla. Vertigo. Disturbance of speech slow scanning weak, explosive & monotonous simulates hysteria. May begin sudden or progresses slowly or in remission form. May live a long time. Prog not bad. May reach a certain degree & recede.

Treatment: French use actual cautery along spine.

April 4.07.

Brain Haemorrhage. Apoplexy is simply a state of sudden stroke etc not nec. Haem. tho frequent Causes: arterial disease. deg. of walls. gen. involvement of advancing years. Millary aneurysms. & bursting. Bld. tension plays important role. At first apoplexy later symptoms of Center affected.

Lenticular Striae - Mid. Cerebral - Op. Th. Int. Cap. Ang. gyrus. Int Cap = Motor tracts & Optic nerve. Predis: alc. Syph. Rheu. gout. Lead etc. & accident cause Haemorrhage. Strains etc.

P. falls. coma. Pallor passes to Congestion Conjugate deviation of eyes & head. tells side of lesion. in Pons P. looks toward lesion. In Pons looks away. if irritating looks from it & in Paralyzing looks toward it. in Isthmus & Pons V. Verser. Immediate after Reflexes are increased & soon absent later increased. Babinsky occurs within one hr. Rectal Temp. lower rises in a day or two if high is fatal. Paralyzed side temp. higher unilateral sweating. Lower face more involved. face drawn away from paralyzed side. tongue deviated toward paralyzed side. Paralysis of Hand & arm is greater. Lesion in Cap. Speech little affected. Dif. articulation if in Hemisphere.

Post Part / Caps. Hemianesthesia. Hemibloodness
if Optic Thal. involved. Some involvement /
sensation thro' Capsule Int. Some trophic
disturbance with state of cornea.

Todd. English - desc. "Growing Gait"
foot clonus. Skin Reflexes lost. Deep Reflex. exag.
jaw jerk reduced to clonus. Pupils normal.
Smooth Platysma weakness on that side.

Oct. 2, '06, History taking:

Mother's Complaint: } pts.
Cough
Chest.

Past History: measles, Scarlet fever, whooping cough.
Family History: (Syph.) Tub. C. Rheumatism.
Marriage.

Present History:

How is approached: undress baby.

1. Inspection: Type of Respiration. Position of Head, etc.

2. Proportion. Glands. Rickets etc. Neck-jerk.

3. Auscultation: 1. back, one, then in front.

4. Percussion.

Rickets. Holt's test

Oct. 3, '06. 2H: Normal child. 17 to 20 inch. 280 days. 50 cc.

Female 7 lb. Male. 7 1/2 lb.

^{continued}
Sudden decrease of weight means malnutrition, mal
assimilation. Or onset of some path. condition.

Average doubles initial weight at 5 or 6 mo.

" 1 yrl. " " 15 mo.

At 7 yr. weight should be double that of 1st yr.

" 14 " " " " 7 yr.

Decrease in weight & length, is in direct proportion
of amt. of Prothid + salts / Mother's milk.

1st yr increase 4 or 5 yrs. in %.

2nd yr increase 3 & 4.

2 yr. 3 to 5 in.

3 yr 2 to 3 1/2 in.

4 " 2 to 3 " Hence 1 3/4 to 2 in every yr.

Slowed or arrested growth due to Malnutrition or
Syph. rickets. Cheatinism,

Proportion. Thorax at nipple 1/2 length + 10 cm

Circ. of Skull around frontal + Occ. Pr. is measurement of thorax + 2 cm

This meas. falls below 32 cm Child is apt to be premature.

When seeds greatly 37. Path. Cond. Ricots or Hydroph.
 Observe quality of Pulse. rate 120 to 140 at birth.
 2 yr. 100-115. then to 80 or 90.

Weight of Heart is 20.5 gm. $\frac{2}{3}$ Ounce.

Weight of Heart is 20.5 gm. $\frac{2}{3}$ Ounce.
R.B.C. 6 million & C.M. Both diminish for first 10 days
W.B.C. 18 thous. " " Spg. 1060.

Ductus Art & Ven. For. Cr. Umb. require some at-
tention. Resp. just abdominal. Upper portions
of lungs not always filled (atelectasis).
Child should breathe with mouth closed.
Rate Resp. 30 & 45 Min.

Oct. 8 '06. ATR. Temp. at birth $99.5 \pm .00^\circ$ in 1 hr. falls to 97. then rises & in a week comes to normal.

Premature child normally temp is below normal.

Stomach lies almost vertically. Slightly expanded
a cylindrical shape. At birth 5 1/2 in. - 1 1/2 in. at birth when
normally full. at wks. 2 1/2 7 oz. 3 mo. 4 1/2 7. 6 m. 6 oz -
at 12 mo. 9 oz. Liver is 2/3 larger relatively at birth
than an adult. Small intestine average length 1 1/2 ft.
large. 10 in. 1/2 of this is Sigmoid flexure.

intes. discharge at birth are dark greenish streaks to the
conduits / Apr. Hair. covered 3 wks lasts 3 days.
first secretion / Mother's gland not milk but serves
to drive out Meconium. After 2 days stools are lemon
yellow color, slight odor. slightly acid & 3% water.
Starved food reaction more acid & brown.

In Dislase there may be false membranes, pus. blood.
mucus, parasites, & foreign bodies.

Stools 2 to 5² a day, normal. Amib. 1 to 2 sp.

all unminors / ² / give settled or or 8 tools.

Color change in disease. Intes. inflam. - green stool.
Clay color due to disturb of Liver. Weak & feeble.
Children have large stool & watery back of apathy. Ab.
Cholera & Intum. colorless, like rice water. Musty
odor. Inflam of Canal Intes. stools are liquid & large.
Inflam of Large Int. liquid, small & infrequent & coated
with whitish mucus.

Head at $1\frac{1}{2}$ yr. is $\frac{1}{2}$ larger than at birth in next
 5 yr. 2 in & next 10 yr. 1 in.
 Ant. & Post fontanelles. ant $1\frac{1}{2}$ ant & post trans
 1 in remains open $1\frac{1}{2}$ to 2 yrs. Post. closes
 soon

Oct. 10.06 Atk. Symptoms:

Posture: healthy child sleeps most of time.

on back limbs slightly flexed or on side.

Babe should sleep sound Disturbed sleep due
 to Hunger or indigestion. do not dream

Colic a form of indigestion with in sleep due
 to contract of sps associated with intense heat.
 Syphilitic & Rachitic Child. sleep badly.

Classes of diseases have typical position & expression.
 1. Affections of gastro intestinal tract.

2. Diseases of Respiratory apparatus.

3. " of Brain.

B. Does not sleep quietly. tosses & tumbles & sleeps
 with more comfort on Belly provided there is no
 ulceration or Peritonitis. Child cries nearly all
 time when awake except before night after eating.
 general expression of waste in general Ex. of face. worn
 form. muscles labr. Depression of Ant. fontanelles.
 Hatched face (sunken cheek & eye. pointed nose & chin)
 Expression is that of care & discontent & disgust.
 skin becomes clay loss of elasticity.

(2). Broncho. Pneumonia: face flushed, eyes bright.
 Anxious continuance & expression of pain in early stages.
 later dull. Murmurs for short time & drops rapidly.
 attempt to cry & cease suddenly. Cough short also frequently
 ending with grunt. Breathing rapid superficial lacking
 rhythm. dilation of Alae Nose when there is obstructive
 dyspnea. Cyanosis when dyspnea is increased
 slight obstruction, depression of unsupported part of
 thorax. supra clav. subcostal spaces etc.
 Skin hot & dry. sleep disturbed.

3. Acute Inflammation of Brain body is used as a substitute

Open the tumor. Eyes usually closed, pupils dilated & irregular, brows corrugated, muscles of face contracted, forehead red & burning. Skin hyperaesthetic.

Cry nocturnal, - early shrieking. The ungates & bone disease produce this sort of cry. In contraction of eye from means headache, pain at sea or irritation of eye in turning head away from light. Crying head & head suggest Otagia. Constantly rubbing nose may suffer from intest. parasites. Cough ^{loud & hoarse} & honorous in Spasmodic Croup. Coarse & harsh in true croup. Cough clear & distinct in Bronchitis early is dry late moist. Painful & suppressed in Pneumonia & Pleurisy. Anorexia more efforts inspiratory than ex in Pertussis. Dry & Paroxysms from intest. parasites. Also dry & spasmodic clear in Typhoid. Malina & remittant. In Diffused dentition may be a spasmodic cough.

Cry shrill loud at night from sleep or in a child well in day means disturbed digestion. Cry lasting from 5 to 10 min several times daily no fever or brain trouble means spasm of Bladder. Cry in passing urine acid

Sharp cry during defecation passage of anus.

Sharp loud cry at night & awake. Brain inflammation.

Hygiene. Do not bathe except eyes, mouth etc.

for first 24 hrs. grease with lard or vaseline.

Bath daily in 100° last bath a short time as older bath colder. Reduce temp 1° per Month. At two yrs give sponge bath in water 70 to 75°. a few. & water used 20° lower. 1 min. follow by friction. Chilliness of Nose tip etc water to cold. Clothing should be loose, warm, light no constrictions.

Oct. 15. 56. first 6 wks. 21 hrs. sleep out of 24 normally. not well without it. Ath. After 8 wks requires less sleep. End of 1st yr. 14 hrs in 24. at 2 1/2 to 3 1/2 hrs of 24. awake in daytime. Well ventilated rooms. Temp. 68.

Continual wakefulness. give Br. of Na or K. 3 grs. at 6 mo & 1 yr. diluted.

After 1 yr. 1 gr. each yr. Asphiria Neomatorum, two forms

1 Antipartum. Present before birth usually die.

2 Postpartum. Causes 1/2. Partial or complete separation of placenta. Interference of Air by pressure of Cord

around chest or neck. Pressure of Cord between head or breech & Plevia of Mother. Inspiration of Amniotic fluid. Postpartum results from immaturity cannot respire cause atelectasies. long continued pressure on Head or cord. Improper application of forceps pressure cause hemorrhage into 4th Ventricle or Ventricle.

3 grades. 1 degree. spunk. cold water. Clean mouth. Blue. 2. Dried or apoplectic in more robust. Tonicity in muscles. Eye balls bulge. Contents injected. 3. Asthenic form occurs in weak children. surface pale. loss of tone of muscles. Lips blue. loss of cutaneous reflexes. Relaxation of Sphincter Ani. Meconium may pass during labor. In Breech presentation Meconium passes. Diagnose Antipartum by auscultation before birth. Pulse rapid. weak intermittent. Symptoms of Post Partum above. Prog 1 & 2 good 3 bad. Heart ceases to beat in 5 min after birth apt to die.

Sylvester's Method. raise arms with something under arms. Skull too .. thumb in index & swing.

Hot Bath & Cold water. Whiskey bath.

Caput Succidanum. infl of Bld & serum on Presenting part of Child's head. Cephal Hematoma under Pericranium elastic touch. elevated. oval. never open May have bony film covering. rattle crackles at times. or bony formation around tumor on skull.

Meningocele: tumors which are hernias. may be membranes or fluid in membranes or membranes & brain substance.

Oct. 16. 06.

Presently

Nervous Manifestations of Rickets.

1. General convulsion. 2. Tetany. 3. Laryngismus Stridulus. Chloroform. Ether. Chloral. Morphine for Convulsions.

Chloral 4 mo. 4 gr. 1 yr. 6 gr. 2 yr. 8 gr. 3 yr. warm Milk.

Morphine. 4 yr. " 1/4 " " 1/6 "

Chloral hydrate per Rectum. Bromides, Antipyrine.

2. Tetany. suddenly stiffen, Head extended. does not lose consciousness. Elbow & Shoulder, Knee & Hip movable.

Chvostek's tap facial

Trousseau's press on vessels & nerves of Elbow causes attacks of rigidity of arms etc.

Laryngismus --- suddenly stops breathing. cyanotic.
Prog. bad. Cold water. Antipyrin

Barlow's Disease (Scurvy Rickets). 6-18 Mo.

Screams on touching, Paralysis, Bruised.

~~Blood~~ Blood under Periosteum. Echinomoses. Blue Echinomoses around teeth. Discard Rheumatism Paralysis excluded by reflexes.

Treatment: Raw milk. Orange juice. Raw meat juice Potatoes.

Dosage. Under 6 Mo. & under 1 yr.

under 6 Mo. $\frac{1}{3}$ yr. old dose. $\frac{\text{age}}{\text{age} + 12}$ of Mean Dose.
over 6 m. $\frac{2}{3}$ " " "

Oct. 22 '06 Athanasia Leturus Neatorum. (Jaundice of New Born).

38 5 day after birth some show yellowish discoloration in conjunctiva first extends. continuous 5-16 days & normal color common all section affected. Urine Billious Orange Hue (excess of Bile Pigment). This is a Phy. form of Leturus. Probably due to destruction of R.B. globules. May be portal blood entering in this. Let. Urine & Occurs in 60% of New Born. More prevalent in Hospitals. $\frac{1}{6}$ gr. Calomel & $\frac{1}{2}$ gr. Pod. Epine. $\frac{1}{6}$ gr. Bicarb Soda.

Malignant Jaundice. due to retention of Bile Element of Bile. results from Stricture of Duct of Gall Bladder. Catarrh of Gall Bl. Duodenal Catarrh. Defective Hepatic Circulation Asphyxia. Malena. Erythema. Long continued as form & color & hardness. Symptoms are prolonged from previous. Drowsiness. Subnormal Temperature. Refusal to nurse. Stools black & tarry. If due to stricture. Stools are Clay Color. Treat cause.

Phosphat Sodium. Calomel. Pick skin active. Breast Milk. Stim Kidneys

Winkler's Disease or acute Neanglobinemia. Swelling of glands in Lymph Nodes. Measles like glandular. Liver & Spleen at Dissection undergo fatty deg. Neanglobinemia. Urine Red Brown copious dark. Some in various forms of Mucosae. Urine small.

Passed with straining effort. Bluish tint of Countenance. Spasms
 changes into deep yellow. Sym. begin 4 day progress rapidly
 then comes Diarrhea. Vomit. Child dies / (Wm. or Cornie
 19/23 died Tetanus Neonatorum (Nine days fits).
 Cause Infection with Tetanus B. Entrance wound of
 Umb. due to filth. Comes on about 9th day.
 More common in Blacks apt to occur in tropical countries.
 As late as 15th day & early as 2 or 3 day.
 1st sym. Trismus (fixed cord) / muscles of Jaw & face
 inability to nurse. Frothy cord around Lip.
 Spasm causes (Sodium Chloride) Whining cry.
 jaws unlock on day of death. Climax is reached in 12 hrs.
 frequently go into convulsions muscular spasms. True
 & Clonic Comb. Die in spasm or coma. Convulsions
 are broken by current of air or sudden noise.
 Generally last about 2 day. sometimes get well. Prog. 700 comp.
 & length of time disease lasts. Treatment: Chloral per
 Mouth or Rectum. Chloroform for Spasms. Hot Baths.
 Inspiration Pneumonia: occurs from inspiration
 of septic material. general in Women / (Gon. & Ent. & tub.
 type tubular. Disease dangerous. Stimulants: Alcohol
 May inspire in Utero. Clean Mouth.

Oct. 23.06. Rheumatism attacks Heart. No two Physical signs occur
 Clements. together. F.H. Strong family History. M. Compensated growing
 pains. ③ Torticollis. ② Tonsillitis. ① Rheumatic rash.
 walks on its toes. stiff Hamstrings. ④ Chorea, Chr.
 ⑤ Endocarditis. These never occur together.
 6 Pericarditis. 7. Peliosis Rheumatica. ⑧ Rheumatism
 Purpura ~~Articuli~~. Erythema Nodosum on tibia. Rash.
 8. Synovitis of joints. Treatment. put to bed milk diet
 Alkaline drinks - R. Salicin.

Lig. Ammon. acetatis
 ag. Cinnamonii

Occurs in children not under 3 or 4 yrs. old. Rheumatism usually follows
 precedes Chorea.

weak Remedy of Potash, weak Sol for mouth good as dangerous.

Oct. 24/96. Disease of Digestive tract. common up to first dentition.
 Atkinson. Stomatitis 1. Simple Catarrhal, 2. Aphthous & Ulcerative.
 3. Mycose, (Parasitic form). Gangrenous, Syphalytic,
 Diphtheritic. Mercurial. 4. Simple Hyperemic mucous Membr
 of Buccal cavity. Alteration of secretion in character & amib.
 Causes: Transfusion. Gastro-intestinal disease, eruptive fevers.
 dentition most frequent cause, Result of Pertussis.
 Symptoms: Slight temp. 100°. child irritable. indisposition to take food.
 takes water, rejects nipple or spoon. may be vomiting. Constipation
 generally occurs early. Pain on contact. Mucous Membr first dry
 then red, swollen. Lips swollen. Charged by lymphatics. later there is
 increase of saliva. Disagreeable odor. Tongue may be coated & swollen.
 Muciparous glands enlarge to assume a papillary appearance.
 Treatment: 20 grs Sol. of Boracic Acid in cold water on soft mop. (lvs. cotton).
 Salicylate of Soda for application 1/10. Nitrate of Silver 1/2 to 1/10 Sol.
 foods cold & liquid. Keep bowels open.
 2. Hyperemia of Mucous Membr Mouth. small superficial ulcers on
 tongue, gum & interior of lips & cheeks. 10 to 13 Mo. may occur at any age.
 folg. follows Gastro Intest. Dis. acute fevers. common in
 convalescence of Pneumonia. Symptoms: High fever. excessive
 irritability increase salivation. sometimes vomiting. Constipation
 common. Lymphatics enlarge more or less. Oval outlines
 inward dentition of ulcers. these ulcers are superficial gray or yellow
 around ulcer is zone of Red. (enlarg. cap.). appear in successive crops.
 tendency to cohere. Treatment: Regulate Bowels. Keep mouth clean. Lysol dil.
 Chlorate of K. 20 to 25 grs. to 3/4 Water for wash. Nitrate of Silver.
 Iron internally. Nutritive Enema. Boxax & Water for wash.
 3. Stomatitis or Mycose (Parasitic form) ^{or ~~micro~~ Thrush.}
~~Candida albicans~~ yellowish white film can be
 wiped off leaves red surface. Comes from use of dirty nipple & spoons.
 sugar at. observed in wasting diseases of children. found in crust. from
 acute diseases. in ^{mycose} children Treatment: Borax & Soda. Boracic Acid
 aa 1 dram Glycerine 2 of water qstt 3. as a wash. Rhubarb & Soda internally.
 Carbolic Acid 2 grs. Salicylate of Soda Boracic Acid 1/2 of Glycerine 2 of Rose Water
 28. 3/4. 4. Ulcerative: Destructive in Broken down condition begins around
 teeth. spreads rapidly & extensive. Rarely found in children under 5. y.
 age. Non-contagious. becomes offensive. Treatment: Chlorate of Potash. dil. HCl.
 Syrup water, 50 grs. HCl, Dil. HCl 3/4. Syrup 3/4. Water 28. 7/10 3. Iron & Cl. 1/2 5/10 10.

Oct. 30.06. Malaria one of 3 vomiting diseases (other 2 are
Clements. Lobar Pneumonia & Scarlet fever) accompanied by Pseuditis
Malaria no malaise. Clear moist tongue. older children complain.

1. Myalgia; intermittent torticollis. Pseudo Appendicitis, gastric form. Rheumatic form. Headache or Hemoragia.
2. Typhoid with intermittent temperature. Young babies often turn blue or pale without a chill. Physical Ex. Skin jaundice with dark stools. Mucous surfaces. Spleen can't palpate in small children; signs of enlargement are rigidity & retraction. Temp may be high yet child may feel well. Chill indicates second infection. Pigment granules of white cells always present. Treatment: Use Hydrobromide or Chloride quinine Sulph grs dilute Sulphuric Acid grs reduces solvability from 1-400 to 1-8. Never give Calomel with Hydrobromide or Chloride. 3 forms of quinine best are Hydrochloride, Hydrobromide, Bisulphate. Milk diet give large amounts at day & let sleep at night.

Oct. 31.06. ~~Pharyngeal~~ Cyclic Vom. In Nervous children. Vom is severe at intervals.
Atkinson 1st is contents. 2nd Mucous. frothy serum sometimes blood stained. not due to errors of digestion. Material is acid (vire). Severe prostration follows these attacks. Gen. preceded by 12 to 24 hrs prodroma: child is weary. Drowsy may be constipation always dull & languid. no appetite. sense of discomfort in abdomen or stomach. Temp. slightly elevated. pulse fast. vomiting almost constant. Temp falls during an attack of vomiting. pulse may be weaker irregular. ~~Diagnosis~~ Apt to be history of vomiting previously. Not preceded by irregularity of diet. By persistence of vomiting. lack of tenderness over stomach. self limited disease. Treatment: Calomel. Alkalis.

Acute Gastritis Acute Inflamm. of Glandular tissue of stomach interferes with digestion. Symptoms may come suddenly. pain in epigastrium. annoying. cry continuous after taking food. Bluish tint around mouth. look of disgust. Temp. 103-104. Vomiting a gradual till stomach is empty. ^{longer} Vom comes early. deficient in vol. Tongue is coated heavy white brown tinge. edge ^{tip} of tongue is red & dry. Always anorexia. diarrhea. contains altered mucous. Attack may begin with convulsions. extreme epigastric tenderness. Abdominal tenderness. sometimes a Pharyngitis. Prognosis: good if properly treated & in strong children. Sometimes Nephritis complicates. Acute cases: avoid food for 24 to 48 hrs. avoid Cow's milk. give Alb. (Egg white) Boil water. ^{4 mls chlor form grs 111.} ^{Antid. opus grs 111.} ^{3rd. 1st. 2nd. 3rd.}

Then give Cathartic. One spoonful Castor Oil. for Vomiting give
 40 gr. Cal. with 400 to 600 grains of Opium. for continued Vom.
 Try Mus Vomica 1 or 2 drops before eating. When Bowels are involved
 Castor Oil & inject cold sterilized antiseptic sol high enema. Sub nitrate
 & gallat. of Bismuth. Salol. Soda Bicarb. 5 grs & amb. injection.
 1 to 3 times a day 1/2 to 3/4 salt solution. Regulate diet. cold
 sterilized water to drink. give few drops of Brandy with water.
 during convalescence. fresh air. exercise. sufficient ventilation.
 keep body clean & warm.

Nov. 7. '06.

Chronic Gastritis. Chronic inflamed lining memb of
 stomach attended with thickening which results in decrease in
 quantity & alteration of quality of gastric juice. Mucous coated with
 gray tough tenacious mucous alkaline in character. digestive powers
 become enfeebled. digestion slow & incomplete undigested is returned
 gastritis & distension results. results in irritation. tenderness.
 prolonged & excessive use of fats may cause this. improper food. & persistent
 acute form. Mucous Membr is grayish with spots of injection red. Pylorus
 roughened. Cells sometimes destroyed fatty deg. takes place. this destruction
 is scattered. Mucoid deg. precedes. after comes atrophy.

Symptoms: Continuous & acute less violent. Vomiting. food, mucous, bile fluid.
 immediately after eating. Child lies on back. legs drawn. Apoplectic look. Blue line
 around eyes. Abdomen enlarged & tender to touch. eructations of gas sometimes acid.
 Bowels usually constipated. attacks of Mucous Diarrhea. Tongue coated in base & center
 brownish gray. edges red & glazed. Papillae enlarged. face old look. muscles flabby.
 Skin dry. tendency to eruptions. Stomatitis & Parastoma. Appetite feeble. eager desire for
 water. Sleep irregular & disturbed. Hands & feet cold. wasting. temperature at times.

Outlook in healthy children not bad. Treatment: regulate diet. cows milk is
 acid & becomes Neutral. rich in fat & salt is domans. Cows rich in proteids food
 not appropriate is in stools mainly casein & Proteids. Barley gruel & water
 used to prevent crag of Casein. Change starch feed. little saliva in mouth (Dysphagia)
 Potrinal water in Constipation. Citrate of Soda & alkaline Cows Milk. Warmly clothed.
 Dry rub in morning. with salt bath cool with feet in warm. Avoid irritating diet
 plenty of sleep. Massage belly gently. Electricity is used. Lavage with warm alkaline Sol.
 Calomel & Soda in minute doses. Phosphat of Soda well diluted 3x a day. Dilute HCl when
 Bismuth Sulphate & Sub nitrate for excessive vomiting. Open air, gentle exercise.
 Bitter tonics

Nov. 12.06 Diseases of intestinal Canal.

Atkinson. Acute Enteritis: simple Diarrhea. Acute Catarrh.
begins with increase frequency of stools. pain in abdomen.
Stools increase from 5 to 20 in 24 hrs. loose. greenish yellow. later
are streaked with blood. more or less mucous. pain just before stool around肚.
Loss of fullness of face. Abd. not tender at first. later tender. Vomiting not usual.
May begin with convulsions. Pulse & Temp. not increased. Prog. good. with good tests.
Tr. 1 dram. Castor oil. $\frac{1}{6}$ gr. Calomel with Bismuth & Salol.
Sub galate of Bismuth 3 gr. Subnitrate 10 grs.
Cinnamon. Water. Chalk mixture.
Lime Water. every 2 hrs.
Don't use astringents till evacuation has taken place. Stop milk food.
Sterilized water for 8 hrs. with 15 to 20 drops Brandy every 3 hrs. Egg use tw.
dram. every 2 hrs. Bee Extract. 24 hrs after Normal stools return to milk.
Tr. Nutt. & Nuxia for Stomach tonic. For Vomiting: Liquid Calcis $\frac{3}{4}$ T
Bismuth & Galate of ~~castor~~ Arum. $\frac{1}{2}$ T
Aqua Cinnamon. Chloroform. 1 dram every 15 min.

Nov. 13.06. Chronic Enteritis.

Clements. Bed wetting 1. Age 7 child. 2. wets bed only. 3. wets bed & clothes.
during day. 4. wets clothes during day.
I. wets Bed only occasionally { Cold in head.
" " " Always. { nocturnal epilepsy.
" " " " " Adenoids.

Treatment. Cold: ordinary treatment. Don't let Epileptic sleep by self.
Adenoids remove.

II. Incontinence by day & night { Urinary reaction { hyperacidity.
{ abnormal constituents { alkaline.
{ Idiopathic { short Bladder. { alb.
{ Diabetes insipidus. { sug.
Anemia.

Acid Treatment: Stop meat. lemonade in plenty of water.

Liq Ammonia Acetatis & Pot. Citrate.

Alkaline: Render urine acid by Sod Phosphate will acidify in 12 hrs.
cut off fruits, give meat Albumin

Sugars: first look to diet. Diabetes abnormal amt of urine.

Anemia: Use tonic to improve blood.

III. Diurnal incontinence. Vesical Calculus caused by
irritation of mucous Membrane. Belladonna questionable.
Purulent discharges from urethra urinary tract is gonorrhea in 90%
Treatment. Pot. Permang. with Protargol 40 to 100%
Children under 2 may be masturbators.

Nov. 14. 06. Chronic Enteritis: Chronic intestinal indigestion, Chronic Enterocolitis. result of continuation of acute form or return of acute at short intervals. may follow any acute infectious disease. May be result of a bad cold. Results from bad hygiene. Type of Hot mictus more severe than cold. Rare in breast fed babies unless constitutional troubles complicate. 3rd Mo. 3 yrs. Occurs about 11 Mo. at time of dentition. Sterilized Cow's Milk most common cause. Symptoms: Stools liquid as a rule. vary sometimes semi-formed. contain greenish white masses like putty. offensive & putrid odor. contain bacteria. contain mucous. undigested food. sometimes blood stain some Pus. Stools are green at beginning of each return. stools 4 to 10. Pain with stools. children just a few. Fever is accompanying frequently. Moderate loss of flesh. progressive form may end in Marasmus. Child is pale. tongue is coated with brownish yellow fur. clear at edges & tip. slight temp. & pulse rate. septic complications are unusual. glands large.

Prognosis depends on treatment. time of disease.

Treatment: avoid milk. ~~Give~~ give flesh in liquid form. albumins. vegetable. fruits. Keep body clean. Brandy frequently.

Protrusions are stood better than fats & sugars. Give injections of cod liver oil daily. or Cocoa Butter. Lanoline. occasional doses of Castor oil small doses. 10 to 15 drops 2 or 3 x a day. Calomel occasionally. Phosphate Soda with Calomel. for Liver. Intestinal Irrigation: 2 to 3 gts warm sterile water. also normal salt solution. Beto Naphthol Bicmuth. 5 grs. Podophyllum 1 gr.

Nov. 20. 06. alcohol 1 dram. 3 to 5 drops morning & evening. Tr. Nux Vomica

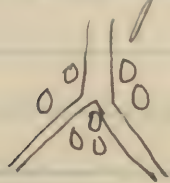
Causes 1. Tetany 2. Tetanus. 3. Otitis Media 4. Naso Pharyngeal Obstruction. 5. Cerebral anemia due to exhaustion. retraction (false hydrocephalus). 6. Meningitis due to Pneumococcus. 7. Cerebral form of Pneumonia & Typhoid.

Bulging fontanelles prove Meningitis.

T.B. Meningitis is Ant. Head straight. facial signs.

Tumor causes pressure congestion & Choked disc.

T.B. Meningitis Opthal. Tubercles on Choroid.



Seven Bronchial Glands.

Chronic Whooping Cough from enlarged Glands press on Recur. Laryngeal Nerve. Cyanosis from Pressure on G. Innominate Vein. Large V. ins. over Clav.

Auscultation Fluid vein Retraction Murrur.

Percussion Dull over glands.

Treatment: Syr. Do. & Dose.

Signs of Enlarged Thymus: Dullness over Sternum.

Nov. 21. 06.

Acute Milk Intoxication: Chlorea Infantum produced by intoxicating milk & milk foods. Summer Disease.

Very uncommon in Breast fed. emaciation great. sunken fontanelles. It lasts for couple of days. there is hypostatic congestion, capillary congestion, mucous membrane. Stools liquid & like mucous membrane. Colon is congested. Multiple ulcers may occur. Symptoms. Mild Diarrhoea. Characteristic onset. sudden.

Vomiting & purging. mucous continuous cyanosis. cold clammy sweat. continuous evacuation green then gradually colorless. consisting serum, desquamated epithelium, stool musty, acid. Swallowing Bacteria. unquenchable thirst.

(Child then dies & Coma which comes on very much like opium poisoning therefore be careful about giving opium.)

May inform for, but so these symptoms return increased.

Prognosis When you continue to use milk will surely die.

Stop Milk Feed only Sterilized water in small frequent

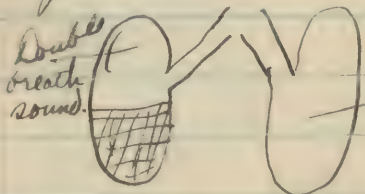
Doses with little Brandy or Whisky. Wash out & 10% bet. & intestines 1% salt solution warm. No time for Cathartics.

After Lavage, Stomach give 3 to 5 grs Calomel. If patient vomits give in extreme cases. Vomiting checks for 24 hrs. If profuse continued with atropia 1/100 gr. don't repeat if heart is too weak.

Digitaline 1/100 Subsalate of Bismuth 5-10 grs. After child eat most all temperatures may return use hydrotherapy not medicines. If child is too cold give warm bath.

Nov. 27. 06

Types of Pneumonia. Vomiting at onset. Prostration in Lobar Pneumonia. Elements. Easy. Rapid. Shallow breathing.



Double breath sounds transmitted from trachea thro solid media. Loud. Loud on axis of compensations.

Fluid does not convey sound because lung is collapsed. Diff. of Pleurisy & Pneumonia is absence of tactile Vocal Fremitus. Diff. of Collapsed & Consolidated is Bronchial Breathing in Consolidated lung.

Pulmonary abscess gives friction sound is present
not in Empyema. Needle moves when in
lung then withdrawn.

Nov. 28. 06.

Atkinson.

Shio Colitis. Dysentery Patches / elevation. acute & Chronic.
occurs some times as an epidemic. always mostly dependent
on a Bacteria. Diphtheritic Dysentery are patches / gray
Pseudo-membrane on healthy membrane. Peels off & leaves
a sliding surface which usually ulcerates. Greater extension
than in other parts. Bacteria conveyed by drinking water.
Sudden chilling often causes the attack. prevails in hot
weather usually. Late hot days / September. Some affection
of Liver are also present. Symptoms / form diarrhea -
discharges a small frequent consisting / mucous &
at times jelly appearance stained at times by blood. Abdomen
tender present. Vesicle toxæmia. Urine scanty
& highly colored. Most children have elevation / temperature.
some distention / abdomen with tenderness. Patient rapidly
loses strength. Face becomes pinched, tongue is dry &
coated by brownish fur. tips red. May be hemorrhages.
Shreds in chronic cases appear. Stools assume various forms.
Sigh / Respiration. Pupil dilated. May be convulsions.

Treatment. Diminish amt. & more frequent. Albuminates are good.

Keep warm. hot stupes. give boiled dates. & plenty / it. Castor oil.

Irrigation. large injections. use no force. 1st. may be used.

Pulv. opior gr. ss.

Sug. / milk is very good.

Pute. Mars Hydrag. gr. III

Pulv. aeromatie gr. XI

Sacra alba . gr. XV

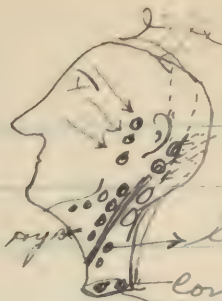
Soft Pute No X. Sig. one every 2 hrs.

Emulsion / starch. & Deodorized Tr. / Opior.

Cocaine 1 gr. Ex / Egor / Quas 12 grs. Aristol gr. 5.

cocoa butter grs. Mals. Make 12 suppositories & size
fitting child, every hr. Give some form / alcohol for
weakness / Day Wine. sweet. Egg / Whgg.
hot fermentations.

Dec. 4 '06 Adenitis:
Clements.



Post Cervical

Est jug Pharynx larynx etc.

Lower part of Pharynx.

Communicate with Bronch & Aortic arch

Post Cerv. gl. Enlarg. 1. Exema or Lise.

Pre auricular. 2. Otitis Externa.

Sup Cerv. at angle jaw. (connect with other sets above.
Ears due to Otitis media.

Sup Cerv. Angle of Hyoid - show Diphtheria.

Angle jaw to lobule of Ear above. Parotid below & behind.

In front or behind Stemo Mastoid at level of Hyoid.

is T.B. Lymphatic. 1. Acute Simple 2. Chronic Simple.

3. T.B. a. Anatomical nature. 3. Physical characters. c. Degree of sensitiveness. d. Discrete or fused. e. Skin involved. f. onset.

g. Constitutional. Acute Simple (1). Infants up to 3 yrs. discard

T.B. under three Bronch & Mes. mostly. 2 yr of Inf Iron.

Isolyl for T.B.

Whooping Cough. Nervous terminations in Bronchial Mucosa is attacked by infectious cause. causes cough.

Begins with running nose. fever. cough at night.

Clements. Vomits later than whoop. Lympholysis in Whooping cough.

Dec. 11 '06. Diphtheria:

1. Nasal (after affects. 6 wks.

2. & Tonsillar

3. Pharyngeal.

4. Laryngeal (Croup). Dangerous at time only no after effects on account of glandular arrangement.

2. Membrane on tonsil & Post. Wall.

Follicular Tonsillitis.

may be small necrosis.

Glands at angle of jaw indicate severity.

Patch may be dark color. Don't depend on detachability.

Goes to bed wakes up with sore throat. any form Patch

Temperature 100 is Diphtheria may be high.

Paralysis: may occur during attack or during convalescence.

Uvula. Heart during attack.

Nasal voice during convalescence. soft Palate. shrinks by nose.

Ophthal. Externa or Interna. Multiple Neuritis peripheral - This recovery is good.

Neck drop. Respiration affected Intercostal Cough - Non Exclusive Stomach Pit bulges during Expiration. Diaphragmatic paralysis. Pulse irregular. Vagus paralyzed.

Mulford's Antitoxin for late Stage Paralysis. Large doses over Buttox (Cohnby / France) 500 units for 3 wks.

Dec. 22 '06 An extreme form of Malnutrition not depending
Marasmus. so far as known upon a constitutional or
Atx. organic disease. caused probably by malnutrition & assimilation.

1. Primary & Secondary.

1. Primary is applied to cases where profound & persistent babies malnutrition in infants fed on properly modified milk. These babies so far as known have no underlying disease constitutional so far as known.

2. Wasting usually found from improper feeding or in course of Const. Disease or Chronic indigestion or resulting from acute enteric diseases not gotten well is known as Secondary. These are more hopeful cure. 1 & 2 Clinically alike. History may differentiate.

Symptoms: Loss of adipose tissue. wght. stringy skin loose & flabby. cheeks sunken. fontanelles ant. depressed. cold extremities. purpuric appearance on skin. ecchymosis on abdomen & legs.

subnormal temperature. Mouth & tongue dry & red.

Appears about 2 or 3 Mo. Bottle fed infants.

Blood concentration. Anemia. Atelectasis pneumonia. Starvation similar. T.B. dullness in front. Lymphatic occurs early.

Treatments: wet nurse. Keep body warm.

Internal stimulation. alcohol. Modified

cows milk fat. 15%. Sug 6% Protein 1.8%

7.5% whey Protein 2.5% Caseinogen Protein. Some doctors recommend Lactat 1 lb. to 2 lb food.

Jan. 8. Acute Bronchitis.

Capillary ..

Broncho-Pneumonia.

Lobar Pneumonia.

Young baby Br. Pneu. is rare. under 1 yr.

Hardly some air enters & Br. Pneu. present.

Acute Bronchitis fever regular 101-02.

	Acute Bronch.	Cap. Br.	Br Pneu.
onset.	grad.	grad.	grad.
Temp.	Mod & sustained	High Remit.	High Remit.
age.	any.	under 1 yr.	any age.
Local Phys.	Bilateral	Harsh & healthy or suppressed.	Bilateral & Unilat.
Dyspnoea	absent.	no expectorations	Basal Crepitations.
Prostration		extreme	fairly severe.

Treatment: Acute Bronchitis.

Calomel Cathartic.

Comp. Tr. Benzoin teaspoonful & put

in Hot water & use steam

Lig. Ammon. Acetas

Sodii Bicarb.

Spiceac. Uris.

Syr. Toluol.

R. Tr. Camphor. Co.

Syr. Spiceac.

Syr. Tolutana.

R. Guaiacol Carb.

Syr. Picea Liquid. } young Baby.

Syr. Tolutana.

Vapor Cresoline lamp.

Jan. 10.07. Lobar Pneumonia: Miss J. M.

Broncho-Pneumonia. Lobular. Capillary Br. Proc.
an inflam. of walls of terminal Bronchi & Alveoli
adjacent, Primary & Secondary.

Primary usually under 2 yrs. May occur at any age
but is most common under 5. Younger child worse Prog.
Secondary are more numerous & dangerous. Measles.

Whooping Cough. Diphtheria. Bronchitis. acute Otitis.
Scarlet fever. Variola. Both Inflam. walls of Small
Bronchi. walls thick & infiltrated. extends to surrounding
Alveoli. Scattered areas of dullness. are Bilateral.

Bronchial lymph nodes are enlarged. Areas of atelectasis
areas between Scapulae as a rule. No distinctive stage.

Develops by irregular invasions successive portions of lungs.
Resolves also irregularly. Inflammatory product is cellular
products may develop into con. tis & form a Chronic Pneum.

Results of Disease: Emphysema, usually from Pertussis. T. B.
can. severe. Symptoms vary: of trachea in primary disease.
Whooping cough. Rapid Resp. Fever rises. Whoops cease &
comes back when Pneumonia is well. Cyanosis some. increase Dist.
Temp. may be high. More incontinent faster Respiration.

Phy. Signs like Bronchitis except dullness. small moist Rales.
Early auscultatory sounds are high in axillae.

Treatment: Muriate of Ammonia is stimulative expectorant.
Stramonine, Digitalis & K. Nitroglycerine, Stry. Digitaline
for heart failure. Atropine for Cyanosis. $\frac{1}{1000}$.

68-70°. Milk shift position. Hot bath for stimulation
of Resp. Comp. Syr. Hypophosphite in Convalescence. Watch
Kidneys.

Jan. 17.07. Catarrhal Laryngitis - False Croup.

reduces lumen, no spasm, awake in spasmodic condition.
well during day. usually extended from above.

Tem 101 to 103 during attack. Eating too much before
going to bed no temp purely Neurosis.

Pseudo Croup. Membr. may not always be due to
Klebs Loeffler B. Chloroform disappears Nervous form.
Give Epistac in small doses for spasm.

Open bowels. Sulphate / Hg. emmetic.
 1 Drop under 2 yr. Tr. ^{aconite} ~~Spice~~ Root. Cresoline. Vapors.
 Bronchitis fever cough dryness. pain. Bronchial
 Nodes are often affected. 100-102°. Sibclint Rales.
 between Shoulder blades mostly. Moist rales
 when secretions return.
 12 weeks. Localized dullness. Dyspnoea
 symptoms are aggravated.
 Keep warm. Aconite - Murial / Ammonia.

Jan. 22/07. Cong. Syphilis.

1 st stage from birth	2 nd Stage 3 rd wk. to 1 yr.	Latent Period.	3 rd stage. Begin 2 nd dentition
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1 mother may have birth at 6 mo.

2 " " " " " 9 " " dead.

3 " " " " " " " Signs of Syph.

4. " " " " " " " healthy for 3 mo.

Baby safe after 3 Mo.

1st stage { this shuffles, Rash. } macule. Papule. Pust. Bores.
 Pemphigus. Rupia. Mild Cases.
 others severe. Rash comes on Palms & Soles.
 shedding skin

Mucous Memb. sensitive on mouth. Mucous Patches
 or Ulcers. stretching to angles of Mouth Rhagades
 Condylomata of anus.

Enlargement is Diphysia in Syph.

Rickets " " Diphysia

Pseudo Syphilitic Paralysis of New Born.

aged differentiates from Paralysis of Senile Rickets
 Ulcer around Nail.

Frontal Bones may project

No Haversian Canals. Bones shrunken

Eyes. Blasted cornea.

2nd stage. Rhinopharyngeal Carcinoma, Tubercles of lungs
 cold white tubercles. Rupture of blood vessels
 Tubercles of nose. Nodule on Testis.

Suppurative Keratitis. gray pus. common. Dugl.
Acute Rash does not happen.

Pharyngitis in skin / 3 stages.

Mucous Membr. Inflamed as Tonsils

Nervous. Infantile form.

Salivation. Diarrhoea is mark to get by.

Pulse. No Anus Crata. G.V.T. 3 or 4 x 5 days.

Ung Hydrg. size / 1/2 gr. for 15 gr.

stop when skin sheds.

Jan. 24 '07.

Exanthemata diseases which have skin eruptions.

Scarlet fever: Mostly over 6 months.

acute infectious Dis. Char by short incub. rapid.

efflorescence. fever. crimson eruption. sore throat

Quarantine in isolation. 4-6 day incubation.

Prodromic not more than 1 or 2 days. Eruption

appears in 36 hrs. after illness begins.

fades about 6th day. Desq. begins 1 day after.

Period of quarantine 40 days from beginning.

Scarlet fever is serious. Occurs in epidemics usually.

During school sessions.

Complications Angina. severe sore throat

thin. greenish-yellow hue. layer. extensive. contains

Streptococci. Endocarditis. Otitis Media is

quite common. Nephritis common. Alb. Casts.

Rid disappears on pressure. Puneta

Temp 101-03. Higher temp. more dangerous.

May begin with Vomiting or Convulsions.

Eruption first on neck, wrist, buttox.

Tongue light white coat. becomes strawberry.

Crimson eruption. fever.

Treatment: Isolate. Ventilate room. nail

Curtains of Carbolic Acid over door.

Tr. of acetate for fever. 1 drop ever 1/4 hr for 1 hr then cap.

Carbolized vasoline over body - lowest temp prevent cold.

Cold baths for fever. Spray H₂O₂ for throat.

Paracetamol for Ear trouble. 1/2 gr acetate Dugl.

1/2 gr alone for R.D. Comp. Galap for effusion - acetate, iron.

Hydrocephaloid: Diarrhoea, Head retracted & fontanelles sunken. Drainage on Brain Pseudo Meningitis. often Called T.B. Meningitis. Treatment is to stimulate. Saline injection etc.

Jan. 31st of Measles: Char. by Naso Bronch. Catarrh. eruption
path. fever. incubation & period of onset. more infectious than scarlet fever. occurs epidemically once in every two years. May attack adults. does not recur as a rule. Prog. very unreliable! first attack in community is severer. Incubation 10-14 days uncertain may be 20 days. begins with coryza. watery eyes. cough-thick watery 3-5 days then temp rises. eruption begins usually on face. Koplik's spots in mouth bluish white elevations on red base. Remittent fever. is peculiar. Scarlet fever is sealy pink. scales are larger. Measles is Bran. Complications: Broncho-Pneumonia. Otitis media. ulceration of Cornea. Meningitis. T.B. quite common. comes on later.

Treatment: Decoction of flaxseed tea & whiskey sweeten & flavor with lemon juice. drink all wanted. ^{or} Syr. Ephraim. Sweet spt. vita. Paragone. Syr. Squills.

Feb. 7, '07. Rubella. - German Measles. - shotty feel. Post cervical glands are enlarged.

Feb. 28, '07. Symptoms: sudden vomit. temp 101-03. after 3 or 4 days
Infantile paralysis sets in. Muscles of lower limbs. then upper.
Paralysis. improvement in 4 wks begins. Muscles early fail & respond to faradic current but increase with galvanic. Pseudo hypertrophic Paralysis. atro all muscles paralyzed except gastrocnemius. Previous History.

Mar. 5.07. Milk Modification:

① Sodium Citrate (C) Calcium salts.

Sod. Citrate aqueous Sol. gr. 64.

ag. Dis. 3 V III.

$\frac{1}{3}$ Skim milk & water.

$\frac{1}{2}$ 1 teaspoonful of Sod. Citrate to ounce.

$\frac{2}{3}$

R. Milk 3 II

water 3 IV

Sod. Cit. Sol. 3 ~~IV~~ VI

one feed.

Cows. Cows. Woman's.

Reaction acid acid

Proteids 3.

2-1. contains more Casein alb. (5-1.)

Casein to Casein alb. 3-1.

Fat. same

Sug. 4%

7%

Bact. swimming

sterile.

① Pasteurizing. 155°

Boiling prevent

T.B.

typhoid.

Cholera.

Scarlet.

Causes - Scurvy.

R. fat 3.50.

Sugar 6.50.

Proteid 1.25.

alkali .5

fatty diarrhoea.

Sugar causes acid erodes anus.

Proteids .. Casein.

Sol at first 4% when stands becomes 10% then 10%

35° take 3 VII of upper $\frac{1}{2}$ milk.

6.50 when 2 take spoon of milk mix in solution.

1.25 3.50 bottom 2.50

.5 add 20 gm. Sod. Citrate to ounce of milk.

add to 20 of boiling water.



Mar. 12-07. Difficulty of feeding baby at breast - &
 a gaining weight, constant colic. & loss wt. no colic
 B baby on bottle

Mother's milk too much proteid she must
 take more exercise large amt of water test
 again at end of week baby gaining wt.

Loosing wt mother does opposite. may
 have to remove child in either case but
 last is usually most urgent.

Modification of milk always begin low
 as 3 mo begin with 1 mo.

M 203 mixture

Rx Fat - 3.00

Sugar 6.00

Proteid .75

Alkali 5.

= 6 3/4 (10%) cream

= 2 1/2 measures teaspoon

2 tablespoons of lime water
 13 ounces of boiled water.

4 - 7 - 10 % are the useful proportions.

Make whey by coagulating with peppar.

Mar. 14-07. 3% fat to begin continue for 1 month go up to
 4%. too low fat cause Rickets.

6 times in proportion amt of water first year.

Tuberculous women should not nurse.

Suffering serious complications during labor.

Chorea or epileptic.

Serious chronic disease. & Delicate.

Women secreting poor milk & deficient amt.

first month 10 times a day once at night.

2 hrs apart. 4 to 8th. wk. 8 nursings a day.

2 to 4th mo. 7 times a day not at night. 4-10 Mo. 6 times.

10-12 5 a day. In adequate nursing. Temperature
 more or less 101-02. especially from 2 to 4 days.

Child is uncomfortable. loses in weight.

after 3 days gain 4g a wh. or more. dry hard stools
 trig at breast.

Papaid? & make agreeable.

Red boiled Sugar Beet for mother's milk.

Mar. 19.07.

Diarrhoea

acute.

1. mechanical

Food.
chill.

2. Infectious form.

a. Ecotogenous

Toxic & cholera infantum

B. Endogeneous.

Coli Communis.

Pyocyaneous.

Proteus.

Streptococci.

3. Dysentery. Coli Communis.

Streptococci. amoeba.

chronic.

a. Lienteria.

B. Mucous disease.

Observe condition of skin: inelastic bad prognosis.
due to oedema due to renal inadequacy.

Treats cut out milk. Support patient.

Chlorea Infantum & severe ilio colitis only use opium.

Blood & mucous signify dysentery.

Wash bowel for ilio colitis.

Stool of Lienteric Diarrhoea.

large. indigested.

Treatment. Diet. Arsenic - arsenicalis.

Large, oily matter, odor bad. - Mucous Disease -
food digested. Mucous thrown off which increases.

Calomel. & Bismuth alkali.

Rx. Sod. Bicarb

Spts am. Ar.

Inf. gentianae.

Mar. 21.07.

Early proteids $\frac{1}{2}$ - 1%. 2 Mo. $1\frac{1}{2}$ % 4-5 Mo. 2%

Don't use whole milk till one year.

Too low Proteids cause anaemia.

Fats 3 times proteids normal 1-3 Mo.

" 2 " " " 3-9 " "

" = " " " 9-14 " "

Milk of 10% fat most often used.

% of fat is always $\frac{1}{2}$ no. of oz. used in 10% mixt.
Removing upper $\frac{1}{5}$ = 12%.

Skimming = 16%.

Cream: subtract protein % from fat %
multiply remainder by total amt. per day.
divide quotient by 12.

Whole milk - multiply amt. of mixture by
Protein % \div by 4. this gives total amt. of milk
& cream - the cream = whole milk.

Amt. of sugar multiply difference between
sugars & proteins.

April 4.07. Infantile Therapeutics. Don't give Nauseant dose.

Highly seasoned soon disliked by child. Small bitter
doses better. Change of air & environment good.

Study alkaloids. Triturates. Calomel. $\frac{1}{2}$ - 40.

Arsenious Acid for Chorea, tonic etc. Fowler's 1-2 drops.

Atropin $\frac{1}{400}$ - $\frac{1}{200}$ gr. Dover's Pu. $\frac{1}{40}$ gr.

Bromides frequent small doses. arseniated Coffee. ^{good}
good in diarrhoea. Lavage of Stomach. Purgation. irrigation.

Phenacetin. good Antipyretic 1 gr. every 2 hrs. 5 gr. 2 gr.

Alcohol good stimulant. well stood.

Flaxseed lemonade with alcohol for measles
to bring eruption. Brandy 1-8 = 1 yr. of age.

$\frac{1}{2}$ oz. in 24 hrs. of Brandy - 4 yrs. double.

Tonics: Cod liver oil. not when tongue is coated - 10-20 drops

pure. Peptonized milk of Bron. Scrophulous use

Eyr. 20. Iron. give in milk. Bland's Mass or Pill
Sol. absorbable.

Paragoric 1 mo. 1 min. 3 mo. 2 min. 1 yr. 5-10 min

5 gr. 30-40. Dover's 1 mo $\frac{1}{2}$ gr. 3 mo $\frac{1}{4}$ 1 yr $\frac{1}{4}$ 2 $\frac{1}{2}$

3 gr. 2-3 grs. Morphin ($\frac{1}{500}$ 1 mo) 3 mo. $\frac{1}{2}$ (1 yr. 1-2) (5-10)

Codein $\frac{1}{500}$ 3 mo. $\frac{1}{4}$ 5 yr $\frac{1}{10}$ - $\frac{1}{4}$. Don't repeat
dose of opium till first passes away.

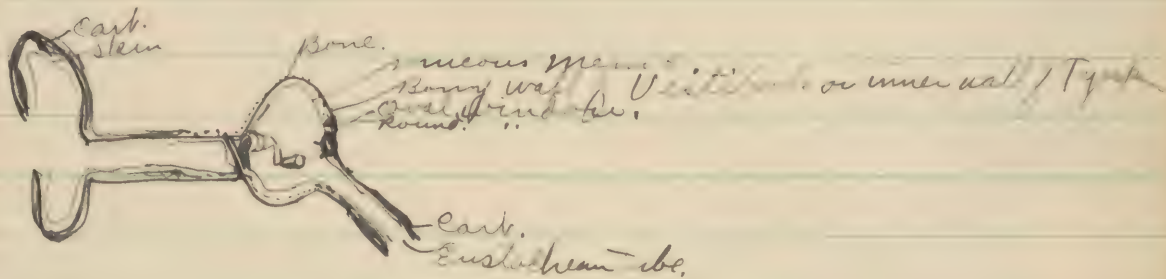
Chloral for anodyne 1 mo. 1 gr. 1 yr 3-5 grs.
every 2 hrs. good in convulsions given by rectum

Oct. 8, 06 Ear: Wilde Specula

1. External: Auricle Ex Auditory Canal

Middle: Ant. Mem. Tym. Out by Ant wall of Vestib.

Inner. Ear.

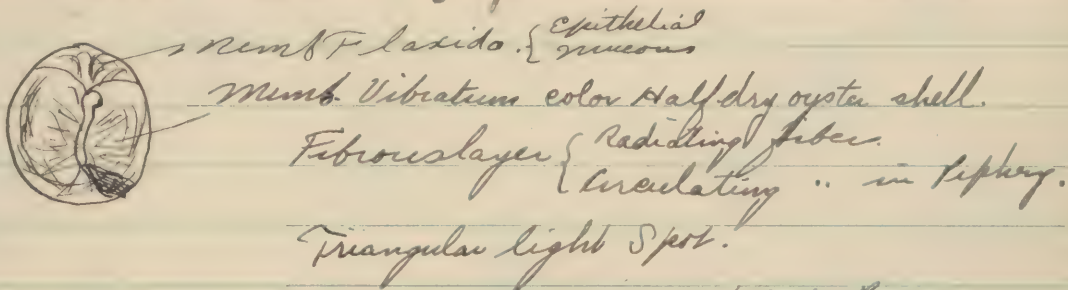


Between Fibrous & Mucous Memb. are Ossicles.

Promontory between oval & round windows.

Skin, Fibrous, Mucous, & Tym. Mem.

Oct. 15, 06



Four Segments of Drum Membrane. { Sup ant & Post

Lines Bisecting each other in center.

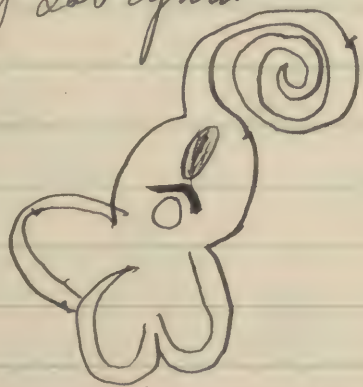
Oct. 17, 06. Corda Tympani. New Plexus on Memb.

Vestibule Cochlea & Pericocleara. { Labyrinth.

Promontory between Oval & Round Window.

Round Window covered with fibrous Memb. safety

Valve of Labyrinth



Membranous Laby within Bony Laby.

Between Memb & Bony is a fluid cald perilymph. Within Memb Laby is Endolymph.

Nerve endings suspended in Endolymph.

Corda Tympani.

Scala Cochlearis. 24000 Cordae Arches.

Musical Noises. - Cochlea interprets musical tones.

Gaynor's Physics.

Oct. 25. '06. Eustachian $\frac{1}{2}$ to $1\frac{3}{4}$ in. lat wall of Nasal Pharynx to Tympanic Cavity. Isthmus near entrance to Tym Cav. Isthmus tube. at point where bony & cart. tube join Inner $\frac{1}{4}$ is Bony outer $\frac{3}{4}$ Cartilaginous. Cart. in Scroll form $\frac{3}{4}$ Boundary. Mucosa in Rugae 72 sq in.

Oct. 29. '06. Max. Anterior connection to Middle Meatus. Another entrance is thro' Molar Tooth. or go thro' alveolar process. Semilunaris Hyatus connects all these sinuses.

Nov. 5. '06.



Tonsil Tonsel.

Plica of Tonsil mostly affected in Peritonsillar abscess. Ventricle Morgani.

Ventricular Band

Vocal Cord Glottis.

Nov. 14. '06. 1. Pain, 2. Deafness, 3. Discharge, 4. Tinnitus, 5. Vertigo.

1. Pain caused by Plugging of Eustachian.

" " Reflexly lowered end of Eustachian tube.

" " by involvement of Cordae Tympani.

" " by extreme exposure to cold.

" " by mechanical irritation.

" " Slap causing pressure on Drum.

2. Deafness: 2 varieties of conducting apparatus. (of conducting apparatus).
Conductive apparatus Ossicles, Oval window.

Perceiving " are Nerve endings of Auditory N.

Impaired hearing may be caused by Rheumatism, Syphilis, long continued Chronic Catarrh, Syphilis.

Small joints of Malleus, Incus & Stapes.

3. Discharge indicates perforation of Drum Membrane except in moist exudate, myringitis.

Purulent Discharges come from Tympanic Cavity.

Cure Patient should not block nose.

4. Tinnitus is ringing of ear. ~~due to~~ Mechanical or mechanical irritation, Vascular: Venous Stasis arterial tension, Arterio Sclerosis.

nervous. Tinnitus may occur in gravid uterus.
 Kidney trouble, Eczema, fevers, Medicines.
 - continuous, intermittent or pulsating.
 Vertigo. Equilibrium centered in
 Semicircular Canal. Unilateral is local
 symptom in ear. Bilateral is general by pressure
 of some of the Nerve endings.

Dec. 3. 06. Otitis Media

1. Acute Non Suppurative Catarrhal.
2. Chronic ..
3. Acute suppurative or Purulent.
4. Chronic ..

6 to 8 wks. divides acute from Chronic.

90% is secondary to Nose affection.

No 1. (Eustache) Air supply cut off by closure of
 Eustachian tube. Tym. Mem. first reddened then
 bulges from excess of mucus

Dec. 5. 06. Catarrhal becomes suppurative when Pathogenic
 organisms enter.

Pain, impaired hearing. Pressure on staples causes
 pressure of Perilymph & thus vertigo.

1. not yet bulging 2. bulging or 3. bursted.

Don't use syringe or inflation where there is a
 fluid in Mid. Ear.

Postnasal Syringe antiseptic alkaline solution. (Dobels Tablets)

Bicarb & Biborate ^{soda} glycerine, Carbolic Acid.

108 10 grs. Borax ^{Bicarb soda} 10 drops gly. & Carbolic 2 gr water.

Drastic Purge. Mg Citrate. Aspirin.

Dec. 10. 06. Acute suppurative Otitis Media:

Make Pathological Examination by Microscope.

1. Stapylus Pyo. albus 2. Pyogenes albus 3. Streptococcus.

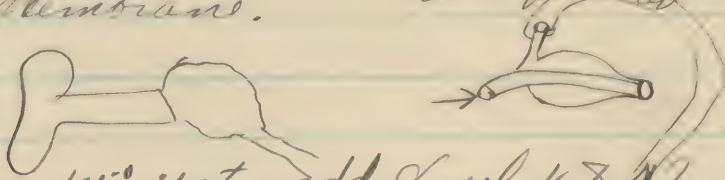
3. first in Primary. Friedlander's rather severe.

Suppurative more destructive. Don't use water but
 pack with dry sterile gauze. Never inflate in
 acute Inf. Ear. Middle ear.

last from 2 to 4 wks. Carbolic acid Power

2. iodic. use. Spray on to surface m.
 Aristol

Dec. 13. 06. 1. sequel destruction / soft parts. striped mucous membrane.



105° water add Lysol $\frac{1}{2}$ to $\frac{3}{4}$ in gal. Water use every 2 hrs. $\frac{1}{2}$ gal. every 2 hrs. low pressure. Cold counterirritated. Wille incision. Leeches. Comp. Tr. / Qo. good counterirritant. use swab for painting over Mastoid Process

Cessation / profuse flow is dangerous goes other way. 2. Aural Polypus has source only in middle ear.

Dec. 17. 06 suppuration in attic is serious & chronic. Post per. is in conjunction with Ineus. Ant. Malleus.

High - Shrapnell's Membr. Membr almost destroyed Sup. is in attic aditus & Mast. granulations not much formed with Pin hole. Ref. Never use cocaine on mucous Membr over 10% Never spray cocaine. Adrenalin chloride diminishes toxic effects of Cocain. 1 to 1000 brushed over after 1 to 10% localin alternate a few times. Adrenalin blanches surface prevents absorption.

Jan. 10. 07. Outcome / Suppurative Otitis Media. Syringe may be used in certain cases where you cannot reach with mops. Continued flow / Pus the focus is in Mastoid Antrum Chronic form may not trouble much but acute exacerbations are severe.

1. Acute. 3. acute exacerbation. 2. Chronic

Suppuration of Mastoid may occur primarily. Temperature not reliable as to extent of Process. R. angle between Temporal line & line of Post. ^{mast. antrum} ~~and canal~~ is place of Elevation. Schwartzes. Simple Mastoid operation. Classic Radical.

Jan. 17. '07. Nose - Extensive Mucous Surface - 36-72 sq. in.
 Rhinitis { Hypertrophic. a.
 { atrophic. B.

Sense of olfaction is in upper section. Mid. & Upper.
 Resp. function . . . lower.
 a. is Prolif. / soft tissue / Mucous & Erectile tissue.
 Develops slowly. Section Epi. multiplied. Erectile
 tis. inc. Fibrin elements present. Bone Hypertrophic.
 Nasal Turgescence. turp is temporary. 1st. 2nd. 3rd.
 Erection shrinks turgescence.

Atrophic Cause obscure. may follow above.

Jan. 21. '07. Hay fever. Rhinitis produced on nerve endings /
 action / Pollen. of Ragweed. Milkweed. Golden Rod.
 Rose Cold. Neurotic Rhinitis.

1. Path Cond. 2. Mucosa. 3. Pollen. 4. Neurotic.

Antitoxin of Dumbax. Pollentine.

Jan. 24. '07. Waterinate / Zinc good in these Nervous Conditions.
 20 or 3 grs 3x a Day pill form.

Adrenalin Chloride 1-3000. Spray.

Don't use cocaine as a spray.

Ad. Cl. Blanches & constricts Mucosa.

Keep Nasal opening open to prevent asthma.

Sedative Spray.

R. Mentholi. gr. iv oily spray.
 Camphor. grs ii

Al. Gaultheri grs ii

Lig Petrolatum 3 IV.

Devil's Atomizer. both water & Oil.

Keep P. out / Dust & bright Sunlight.

Feb. 4. '07. Follicular Tonsillitis. Parenchymatous.

Diphtheria fever not so high. usually begins unilateral.

Eandate limited to tonsil in tonsillitis.

Chazy white Eandate in Tonsillitis.

Chazy product / Bacillus in tonsillitis. Can be excised surg.
 bleeds in Tonsillitis - is danger. Grip Tonsillitis is a cross.

Tonsillitis is shorter duration.

acute & secondary to Erythema.

Mar. 4. 07. Nasal catarrh. deflected septum irritated & congested side. Vasomotor disturbances increasing secretions.

Chronic Rhinitis: 1. Simple. 2. Hypertrophic. 3. atrophic. 4. Specific.

1. Constant exposure to irritation. Sl. Path. change.
2. Secondary to frequent irritation frequent colds / head.

Turgescence is inc. Bld. Supply in Mucous Membr.

Mar. 11. 07. Trichloroacetic acid for hypertrophy.

Chronic acid. on silver props. cocaineize first.

Preserve Mucous Membr.

Masillanum antrum to mid turbinal bone.

Oct. 23. 06. Hydrogen. Sym. H. At. Wght. 1.008 Mol. wght. 2.016 1 Lit. .0899 gm.
1 gm. occupy 11.16 Liters Standard Cond.

Occurrence. disc 1776 ^{and get} Cavendish. 2. At. 2 pts in 10000. 3. Near Volcanoes
4. Near fumaroles. 5. Comb with water & some or organic Comp.

Prep. 1. acidulated H_2O + Electricity. 2. Decomposing H_2O by carbon metal
as Sodium. Rin Cold. $H_2 + 2H_2O \rightarrow 2NaOH + H_2$ 3. By mineral acids
on metals as Zn. $Zn + H_2SO_4 = ZnSO_4 + H_2$.

Physical Prop. Colorless, odorless, tasteless gas. 2. $14\frac{1}{2} \times$ lighter than air.
3. 1 L. wght. 0.0899 g. 4. Can be liquefied. 5. Can be ignited by finely divided
Platinum. Chem. Properties. 1. Very inert body 2. H_2 & Cl_2 gas. for HCl in light in
dark do not combine. 3. It is combustible gives higher heat than any known sub.
4. Does not support combustion. 5. Comb. with $\frac{1}{2}$ vol. of O form H_2O .

Always in same proportions. Law of Definite Pro. 6. Reduces at high temperatures.
Ferrum Reductum of Pharmacy. 7. Nascent H. is in ionic state. active body.
8. It acts somewhat as a metal. may call acids salt of H. Uses 1. To fill Balloons.
2. as a reducing agent. 3. Drummonds light or blow pipe light.

Oxygen Sym. O. At. wght 16 Mol. wght 32. 1 L. wght. 1.439 gm.
16 gm. occupies 11.16 L. at St. Cond. Occurrence. Disc by Priestly 1774
& by Scheele in Sweden. 2 Occurs in air. in Organic Comp. some
inorganic & most widely distributed of substances. Prep. by heating
Red Oxide of Hg or HgO . 2. HgO heated $\Rightarrow Hg_2O + O$. Heat $Hg_2O \Rightarrow Hg + O$
3. Heat MnO_2 to Redness $\Rightarrow 3MnO_2 = Mn_2O_3 + O_2$. $MnO_2 + KClO_3 \rightarrow$
 MnO_2 not changed. $2KClO_3 = 2KCl + 3O_2$

Phy. prop. 1. Odorless etc. 2. Sp. G. 1.1056 3. Dissolves in water to 3%.
4. Can be liquefied 1 L. wght 1.43. Chem. Prop. (1). forms oxide of all elements
except Fl & Br. Helium Argon, etc. 2. Very active chemically. 3. Most elements
combine directly with O. at comp low temp.

Combustion. is rapid Oxidation of a body with production of light & heat.
Oxidation is slow combustion with evolution of heat but no light.
A body is combustible when it will ^{unite} with O. to form light & heat.
Carbon Comp as a rule are combustible. 4. Ignition point is temperature
to which a body must be heated before it will unite with O. & burn.

Candle flame & lamp flame. ^(inner zone is blue) Inner zone Middle & Outer.
Outer zone is oxidizing flame. ^(inner) Middle zone consists of green ring formed
middle zone is reducing flame.

Oct. 29.06 1. Name of Drug. 2. Source. 3. Chemistry { ^{group.} ^{Class.} ^{Formula.} ^{Incompatibilities.} ^{Tests.} ^{How made.}
 Brown. 4. Pharmacy ^{Dose.} U.S.P. 5. Physiologic action. 6. Therapeutic action. 7. Toxicologic action & Antidotes.

Oct. 27.00 Uses of Oxygen 1. Oxidation. 2. Disinfectant. 3. Blow pipe analysis. 4. Chem. Comp. 5. Bleaching. 6. Active Principle in H_2O_2 & O_3
 Ozone Preparation: Electric sparks passed thro a Siemens ozone tube containing oxygen. 2. In air after Electric storm. found 3. Non frictional Electric Machines. $2K_2MnO_4 + 3H_2SO_4 = H_2SO_4 + 2MnSO_4 + 3H_2O + O_2 + O_3$ 5. Ozone in Atmosphere 1/4, 700,000
 Allotropism. Allotropic forms of O. = $O=O$ O_2 .

Properties: Those of Oxygen intensified. Tests: Starch & KI = Blue. Ozone breaks up KI.

Water & Hydrogen Peroxide. Water exists in Solid, liquid, Vapor. Solid below & up to $32^\circ F$. Between 0 & 100 $^\circ F$. above 100 Vapor.

Prep. 1. H & O in a tube + Electricity 2. Burning H in air or Oxygen.

3. Neutralization of Acid & Base. $NaOH + HCl = NaCl + H_2O$.

4. In reduction of Metallic Oxide. Physical Prop. Liquid.

no taste, bluish color. Boiling pt. $100^\circ C$. 3. Water Expands in freezing.

4. Little pure water in nature. Chem. Prop. Many metals + water = Hydroxide

with SO_2 & CO_2 get acids. Dissociates Salts into ions. taken up by desiccating agents P_2O_5 , $CaCl_2$, H_2SO_4 . Natural waters are never pure.

Potable: spring, well, River, Lake water. Clear & good water: { Potable, mineral, saline.

Clear, colorless, odorless, must not be too cold, agreeable taste, free from organic matter.

7. Must not have too much hardness, due to Power to decompose soap. due to acid carb. & sulph. / Car & Mg. Hardness temp. or Permanent. 1 due to Carb.

Perma due to Sulph. To get rid of Hardness 1. Temp. Boiling $CaH_2(CO_3)_2 \rightarrow CaCO_3$

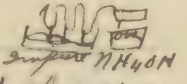
+ H_2O + CO_2 2. By adding lime & Water. Perma. Hardness. K_2CO_3 + Na_2CO_3 .

Evidences of Organic Matter: 1. Nitrates & Nitrites. 2. free am. 3. Albuminoid am.

4. Total Org. consuming power.

Oct. 30.06. The point to all Precipitations is to render a soluble compound less soluble. Tests for nitrates & nitrites in water 1. Diphenol Amine in strong H_2SO_4 . Equal volumes of H_2SO_4 + water + (10 fundrops) give a deep blue. Nitrites alone 2. Carry out same way as no. 1, except use Meta Diamine gives yellow to brown. 3. Water + little H_2SO_4 + K Permang which produces purplish color after 15 min color disappears if organic is present 1. Purifying water 1. filtration. 2. Sedimentation Natural. 3. Sed. by Chem means. 4. Boiling. Mineral water 1. Carbonated. 2. Sulphureted. 3. Alkaline Na & K.

4. Saline 5. Chalybeate or iron. 6. Acid cont. H_2SO_4 or HNO_3
 7. Thermal. Official forms *Aque Dick* Medicated water 18 of them
 Hydrogen H_2O_2 occurrence: 1. Traces in water. 2. Traces in snowflakes 3. air
 Peroxide. Prep. $BaO_2 + H_2SO_4 \rightarrow BaSO_4 + H_2O_2$ 2. $BaO_2 + HCO_2 \rightarrow BaCO_3 + H_2O_2$
 3. $BaO_2 + 2HFl \rightarrow BaFl + H_2O_2$
 Commercial Prep. Ordinary $H_2O_2 = 3\%$ Solution of glycerine 5-25%
 Use. Bleaching by direct oxidation. 2. acts on lead of oil painting
 3. Disinfectant. 4. Tests for Blood & Pus.

Prep. 1. ~~from~~ Phosphorus in confined space $P_4 + O = P_2O_5 + N$. 2. Pass air
 over metallic copper or iron heated to redness. 3. Liquid air N. given off first!
 4. By heating ~~am~~ $(NH_4)NO_2 \rightarrow 2H_2O + N_2$. Properties: Physchem. Colorless etc.
 2. Incombustible does not support combustion. 3. not poisonous. 4. Inert Chem.
 5. Unstable Compound. 6. By Elec. Current $N + H$ with unitate form NN_3 also
 $N + O \rightarrow N_2O$ (Lg.). Comp. $N + H \rightarrow NH_3$; source: 1. Decomposed animal matter
 2. Commercially Prep. from coal which contains 2% N. Byproduct in formation of
 illuminating gas.  Impure NH_4OH from gas works.
 treated with $HCl \rightarrow NH_4Cl + H_2O$. \rightarrow Sal Ammoniac. + ~~CaO~~
 $2NH_4Cl + CaO \rightarrow \quad NH_3 \rightarrow$ in water = Com.

U.S.P. Aqua Fortior Am 28% by Wght. Aqua Am. Dilutum 10% by Wght.
 Prop. Pungent. Colorless. gas cannot be breathed 2. Not combustible in air
 but will burn with dif. in O. does not support Comb. 3. Lighter than air. Liquefies
 easily. 4. Very Sol. in Water. 5. Sometimes called Volatile Alkali. Tests: 1. odor.
 2. flames with HCl . 3. Litmus test. Uses: 1. Salts of Am are used as fertilizers. 2. Therap.
 Salts are expectorants. 3. Manufacture of Ice. Lig. Am.

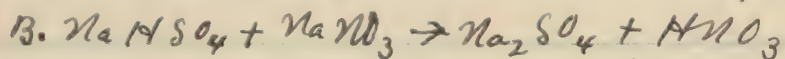
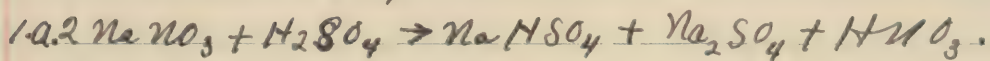
N_2O 5 known Oxides of Nitrogen N_2O (Lg.) Nitrous Oxide or Nitrogen Monoxide.
 Disc. by Priestly 1776 first used as an Anesthetic by ~~Hard~~ Darg.
 Prep. 1. Heating Am Nitrate in retort NH_4NO_3 to $210^\circ - 250^\circ \rightarrow N_2O + 2H_2O$.
 for Anesthetic purposes should be run thru Sodium Hydroxide.
 Prop. Sweetish colorless gas soluble in water & alcohol. Support Combustion
 3. For Anesthesia liquid from tubes glass cylinders. Stages of Anesthesia: 1. ~~Exc~~ *Excitation*
 2. Anesthesia 3. Danger Asphyxia. Acts as Excluding Air 2. affects Central Nervous System
 Excreted: Does not decompose in blood. Merely dissolved in blood. thrown off by lungs
 as Nitrous Oxide. Other Oxides 2. N_2O_2 Nitric oxide 3. N_2O_3 N. Trioxide
 4. N_2O_4 N. tetroxide 5. N_2O_5 N. Pent O.

Nov. 13.06.

Nitrogen
Acids.

1. $H_2O + N_2O \rightarrow 2HNO$ hyponitrous acid O g ns O g no.
2. $H_2O + N_2O_3 \rightarrow 2HNO_2$ has not been isolated - nitrites well formed.
3. $H_2O + N_2O_5 \rightarrow 2HNO_3$ has been isolated.

Nitric acid. Prep.



Properties: Colorless, heavy, fuming liquid. 2. Sp. grav. 1.52. 3. Exposed to air turns yellow due to production of N_2O_4 . 4. Strong Oxidizing agent.

Tests: 1. few drops H_2SO_4 + Iodide + $HNO_3 \rightarrow$ decolorizes. 2. Copper turnings + $HNO_3 \rightarrow$ greenish blue liquid red fumes.

Physiological effect: 1. small doses is stomachic large doses is corrosive & dis. portion tissues become yellow at first. Antidote: 1. Milk lime. 2. Sodii Bicarb.

Atmosphere: 1. Mixture of gases. 2. one liter weighs 1.293 gm. 3. 14.44 times heavier than H. 4. Composed of 20.61 O. 77.95 N. by Volume. 23 + O by Wght. 73 + N. by weight.

Argon, Helium, Xenon. 1% Water Vapor. CO_2 4, below 10000 NH_3 Traces of H_2O_2 over cities. Traces of H_2SO_4 . Liquid Air. Air first put under pressure 2. Surrounded by cooling mixtures. Properties: bluish liquid. 2. Sp. g. 9. 3. boils at $-191^\circ C$. (a) Nitrogen passes off more rapidly (b) leaves 50% N_2 of O.

Disinfectants Atmosphere 1. Heat. 2. gases. Ozon. Ox. Cl. Bm. etc. 3. Solids.

by Cl_2 Chlorides of zinc, Al & K permang. Carbolic Acid.

4. Liquids: (soluble solids) \rightarrow Decolorize \rightarrow Destroy offensive docs.

1. Dry earths 2. lime, charcoal, ashes. 3. Liquid, Lead Chloride. $ZnCl_2$ (Barnett's Fl.).

K & Na Permang mixed (Condy's fluid). 3. Gases. Ozon, formaldehyde. Chloral.

Sulphur. 1. Occurrence. Volcanic regions, 2. In clay. 3. As sulphate, gypsum etc.

4. Sulphur waters. $2H_2S + O_2 \rightarrow 2H_2O + S_2$.

Prep. 1. from native sulphur. found in clay by distillation. 2. dist. by apparatus.

3. By roasting iron pyrites $3FeS_2 \rightarrow Fe_3S_4 + S_2$.

2. first flowers of Sulphur. Not taken. 3. Roll sulphur or Brimstone.

In B. heat fast. Physical Properties: 1. Ordinary sulphur yellow solid.

2. Boils at 148° Melts at 115° . 3. Non conductor. 4. insoluble. 5. best solv. CS_2

Allotropic forms. 4. 1. Native Sulphur in octahedral Crystals. 2. Melted high then cool get monoclinic crystals. Dimorphous, 3. Heat to Boiling point & plunge into cold water becomes partly rh. 4. Amorphous powder.

Official forms of S. Sulphur sublimatum. 2 Sulph. Sature = flowers of S. digested in NH_4OH then washed.

3 S. persulfatation prep as follows. $3Ca(OH)_2 + 6S_2 \rightarrow 2CaS_5 + CaS_2O_3 + H_2O$ + $HCl \rightarrow 3CaCl_2 + 3H_2O + 6S_2$

4. Unguentum Sulph. 10% Sulph in Benzated Lard.

$H + S \rightarrow H_2S$ or Hydrogen Sulphide or Sulphuretted H.

(H_2S_2 Hydrogen persulphide not important.)

Occurrence: 1. In volcanic gases in mineral springs. 3 result of decomposition of various sulphides 4. Result of decomposition of organic matter. Preparation: Treat FeS or ferrous sulphide with an acid = $FeS + H_2SO_4 \rightarrow FeSO_4 + H_2S$. properties:

1. Colorless, transparent gas, 2. odor of Rotten Eggs. 3. heavier than air

4. can be liquified. 5. Poisonous when inhaled. Chem. Prop. Burns with blue flame $H_2S + 3O_2 \rightarrow 2H_2O + 2SO_2$ 2. Decomposed by Halogens.

3. $KOH + H_2S \rightarrow KSH + H_2O$. Uses. used principally in Chem lab. as an analytical agent. Phy. Prop: 1. Narcotic poison 2. Acts as a reducing agent on blood preventing oxy haemoglobin from taking up oxygen. 3. By stomach does no harm. 4. popular remedy for gout. Rheum, etc. 5. Poisoning may be acute or chronic generally acute. Treatment in acute Oxygen gas, pure air, stimulation by brandy, some give Cl. Water. Sulphur & Oxygen & Sulphur dioxide

Prep. 1. Copper + $H_2SO_4 \rightarrow CuSO_4 + SO_2 + H_2O$. 2. Burning S. in oxygen or in air, 3. $H_2SO_4 + C + heat \rightarrow 2H_2O + 2SO_2 + CO_2$

Phy. Prop. 1. Gas. pungent, suffocating. 2. Soluble in water making Sulphuric acid $SO_2 + H_2O \rightarrow H_2SO_3$. Chem. Prop. 1. Non combustible 2. Does not support combustion. 3. Nascent H. reduces it to H_2S & H_2O . 4. Valuable reducing agent taking up O. from H_2SO_4 Uses. 1. Disinfectant. 3 lbs. sulphur burned for 1000 cu ft. space. 2. Deodorizing agent. 3. Bleaching agent

Sulphur Trioxide SO_3 Prep. 1. By distilling Nordmann's Sulphuric acid $H_2S_2O_7$. 2. Passing SO_2 gas thru egl. containing finely divided Platinum Sulphuric Acid. H_2SO_4 Prep. 1. By Platinum method. (oil of Vitrol)

2. a. FeS_2 roasted in O. b. $2HNO_3 + H_2SO_4 \rightarrow H_2SO_4 + 2H_2O + 2NO_2$
 S_2 gives SO_2

c. $2HNO_3 + 2SO_2 \rightarrow 2SO_2 \cdot ON \cdot NO_2$ nitrosulphuric acid.

d. Jet of steam $\rightarrow 2SO_2 \cdot ON \cdot NO_2 + H_2O \rightarrow 2H_2SO_4 + N_2O_3$

Prop. 1. Heavy oily liquid 2. takes up water from air & forms Sulphuric acid & heat. 3. Peculiar action on unsized paper produces parchment paper & paper H_2SO_4

5. forms 2 series of salts Normal sulphate & acid sulphates: Med. effects

1. Dilute is tonic & astringent. 2. Large doses is corrosive poison. Antidote lime water. alk. Sod. Bicarb. Official Prep. 1. Strong H_2SO_4 oil of Vitrol.

2. Dilute 10% . 3. Aromatic this is the sol. 5% of ginger & cinnamon

Nov. 26. 01.

Tests. BaCl_2 . General Properties / Halogens.

1. Electro negative. Fl. Is least.
2. Pungent Odor.
3. Disinfectant.
4. Bleaching agents.
5. Form Binary compounds with most elements.
6. Lower members set free the higher.
7. Comp. with Hydrogen have marked acid properties.
8. Have but little affinity for Cl . all form Oxides except Fl. 9. Valence 1. Fluorine Cl . at. wt. 19. Val. 1. sp. g. 1.3.

occurrence in ~~fluorapatite~~ ^{crossed} (Ca Fl_2). 2. Cry. like NaCl fluoride.Prep: By decomposing Pure H_2F in Platinum tube with El. current.Prop. 1. Pungent gas. 2. Decomposes water gives H_2F . $\text{H} + \text{Fl}$. Prep. Ca Fl . $+ \text{H}_2\text{SO}_4 \rightarrow \text{CaSO}_4 + 2\text{HFl}$. Prop. a transparent liquid 3. fumes givingoff Pungent odor. corrodes skin 4. Ability to etch glass by removing its silicon. Fl. forms no oxides. Cl . at. wt. 35.5 sp. g. 2.47 Val. 1. -2-5-7.generally in form of chlorides Sodium. Prep. in $2\text{H}_2\text{SO}_4 + \text{MnO}_2 + 2\text{NaCl}$. $\rightarrow \text{Na}_2\text{SO}_4 + \text{MnSO}_4 + 2\text{H}_2\text{O} + \text{Cl}_2$. (3) $4\text{HCl} + \text{MnO}_2 \rightarrow \text{MnCl}_2 + 2\text{H}_2\text{O}$ 2. By decomposing Chlorinated Linal. 3. Manufacture of NaOH by Elect.Na Cl . Prep. Prop. 1. greenish yellow gas. pungent odor. 2. $2\frac{1}{2}$ times H_2 .

3. Can be liquefied. 4. Poisonous & mucous Membr. Chem Prop. 1. has

strong affinities for H & Metals. 2. all metals are tarnished by Chlorine.3. Burns in atmosphere of H gives HCl . 4. Allotropic forms. a Chlorine prep indark is not active. B. Cl in light is very active. 5. Bleaches because ithas a strong affinity for H . Takes H from water & sets free nascent O . & thisO. oxidizes the colored colorless comp. Most important comp is HCl

occurrence in Nature 1. Volcanic regions, in Stomachs of Mammals.

Prep. 1. $\text{H}_2\text{SO}_4 + 2\text{NaCl} \rightarrow \text{Na}_2\text{SO}_4 + 2\text{HCl}$. By direct union of H & Cl . a. in

tube in light. B. Tube with El. current. 3. as By product in LeBlancs

method for production of Na_2CO_3 Phys. Prop. 1. Colorless transparent gas

2. Pungent Penetrating odor. 3. does not support combustion 4. Sol. in water.

5. Sp. g. 1.21 = 32% acid. Chem Prop. 1. strong acid. 2. forms salts called chlorides.

3. When HCl is dry it has no acid properties. Official prep. Acidum Hydrochloricumsp. 1.10. 1.9% acid. Acidum Hyd. Del. 10%. Tests: 1. $\text{MnO}_2 + 2\text{HCl} = \text{MnCl}_2$.Silver $\text{NO}_3 = \text{White PP}$ Ag Cl . 3. $\text{Mg}(\text{NO}_3)_2 + 2\text{HCl} \rightarrow \text{MgCl}_2 + 2\text{HNO}_3$ + Am $\text{OH} = \text{Black ppt}$ precip. Aqua Regia: 100 cc HNO_3 + 20 ccof $\text{HCl} \rightarrow$ yellowish liquid. Nitro HCl acid.Bromine. Br Br 80. Sp. g. 2.99 Val. 1. Occurrence. Never free 2. salts

of alkali metals & alkali earths. 3. Salts of sea water. 4. Saline springs

Prep: from sea water by evaporating & crystallizing which leave NaBr & KBr Bromides & Cl gas set free Br. 2. Most of today comes from Manganese

spring, in starfish. Phy. Prop. 1. Heavy dark red, motile liquid & gives off at ordinary temp. gives off spiritant fumes. 2. Sol. in water. Readily soluble in ether & alc. & CS_2 Chem. Prop. similar to Cl only weaker.

HBr. Prep. 1. Phosphorus $\text{Br}_3 + 4\text{H}_2\text{O} \rightarrow \text{H}_3\text{PO}_4 + 5\text{HBr}$. 2. $\text{KBr} + \text{H}_2\text{SO}_4 \rightarrow \text{KHSO}_4 + 2\text{HBr}$. Prop. It is a gas colorless 2. Can be liquefied. 3. Sol. in water. 4. forms salts called Bromides. Weaker acid than HCl.

Dec 4/16 Iodine Occurrence: Seaweed. 2. Springs with Clor Brs .

standing sea water. Mostly from seaweed. Prep. 1. Seaweed dried in sun 2. Burned in shallow excavation at a low temperature as not to volatilize I₂. 3. Ash called Resid. it is then leached in water. 4. Then evaporated in open pans which allows some other salts to crystallize out. 5. Mother liquor called So lye - which is left in pan - is mixed with $\frac{1}{2}$ vol H_2SO_4 & stands 24 hrs.

H_2SO_4 breaks up carb. & hyposulphides & Sulphides.

Na_2SO remains & unites $2\text{NaI} + 2\text{H}_2\text{SO}_4 + \text{MnO}_2 \rightarrow \text{Na}_2\text{SO}_4 + \text{MnSO}_4 + 2\text{H}_2\text{O} + \text{I}_2$.

Phy. Prop. 1. Blueish black crystalline solid 2. heated gives off violet vapors. 3. only sl. sol in water. 4. Sol in alc. & K.O.

Med. uses: 1. Counterirritant. 2. Alterative internally. 3. Eliminated by K.O.

& Saliva not by skin. Official Prep. 1. Tr. I₂. alc sol. 70 gms I₂ 50 gm K.O.

to 1000 cc alcohol. Colorless Tr. I₂ is made by adding am H_2SO_4 to ordinary Tr. comb with I₂ & forms NH_4I . 2. Lugol's Sol.

(5 gms I₂ 10 gms K.O. H_2O 95. 100 gms.) Unguentum Iodii 4/16 rubbed with KI & H_2SO_4 & mixed with sand. H.O. 1. colorless

gas. 2. Breaks up easy giving free I₂. Prep. $\text{I}_2 + \text{H}_2\text{S} \rightarrow 2\text{HI} + \text{S}$

Tests for Iodine. 1. Starch test. 2. Carbon Bisulphide dissolve

I₂ giving Blue Color. 3. Silver Nitrate \rightarrow yellow P.P.

KI. Crystalline sol. salt. Prep. $\text{MnO}_2 + 6\text{KOH} \rightarrow 5\text{KI} + \text{KIO}_3 + \text{H}_2\text{O}$

Evap. to dryness then heated the KIO_3 breaks $\rightarrow \text{KI} + \text{O}_2$.

Antidotes: Starch flower, milk, white egg.

Phosphorus. Occurrence: 1. Diss. by Brand 1669. in urine. 2. Noted by Galen 1167. in bones. 3. Most common mineral is $\text{Ca}_3(\text{PO}_4)_2$ Most P comes from bone.

Prep. I. Urn / Bones treated with H_2SO_4 $\text{Ca}_3(\text{PO}_4)_2 + 2\text{H}_2\text{SO}_4 \rightarrow \text{CaH}_4(\text{PO}_4)_2 + 2\text{CaSO}_4$ dis in water leaves CaSO_4 undissolved. II This Sol of $\text{H}_4\text{P}_2\text{O}_7$ + sand is evaporated to dryness then heated $\text{CaH}_4(\text{PO}_4)_2 \rightarrow \text{Ca}(\text{PO}_3)_2$ 2. with P_4

+ water. $\text{Ca}(\text{PO}_3)_2 + 2\text{SiO}_2 + 10\text{C} \rightarrow \text{CaSiO}_3 + 10\text{CO} + \text{P}_4$ Phosphorus carried under water & condensed.

Allotropic forms 1. Yellow or amorphous Phosphorus. 2. Red Phosphorus.
 3. Metallic or crystalline. Properties: Yellow Ph. Translucent wax like solid.
 2.5 g. 182. 3. By light becomes covered with W. Powder. (P_2O_5) 4. Luminous
 in dark. 5. Exposed to moist air gives cho / ozone. 6. Insol in water. Sol in alk.
 but sol. int is Carbon Bisulphide. Red Ph. (Amorphous.) Reddish brown
 amorphous powder sp. gr. 2.14. Insol in Carbon Bisulphide. does not show
 phosphorescence. 5. not poisonous to wooden. 6. heated iron. or melt out
 sublimed. 7. formed by heating red phosphorus in an atmosphere of NO_2 for 56 hrs.
 to a temp. $260^\circ C$.

Chem. Prop of Yellow Phosphorus: 1. Easily ignited. $60^\circ C$ Burns yellow flame.
 P_2O_5 . 3. May be burned under water by throwing set / S. on it.
 4. For reason in 3. must be under water. 5. Lign of Red Ph. which
 is not easily oxidized. 6. unites readily with all halogens. 7. forms comp.
 with all elements except C & N. Phys. Action. 1. by handling causes burns.
 2. Burns cause severe poisonous symptoms. 3. after Poisoning. weak pulse
 cold extremities. 4. Burning in stomach. 7. gastroenteric. 5. Dilated Pupils.
 6. Delirium. 7. Average time life is 3 to 4 days. Dose. $\frac{1}{4}$ to $\frac{1}{2}$ gr. may be poisonous.
Antidotes: 1. No real Chem. Antidote. $CuSO_4$ as an Emetic & gives metallic
 coating to Ph. rendering it more harmless. $KMnO_4$ H_2O_2 .
 2. Emetics. Stomach pump. 3. Mucilaginous drinks. Never give fats.
 4. Ozonized turpentine. 5. Supportive. Chronic Poisoning: workers
 in Ph. match factories. 1. fatigue. anemia. necrosis of jaw. fatty liver.
 & Kid. swollen gums. Inflamm. mucous lining / Mouth.

Analysis of Stomach Contents. 1. Dilute Contents with water. 2. acidulate
 with weak acid (Tartaric). 3. Distil this on Sand bath. connected with
Liebig's condensers. & Pass in $4y NO_3$ this is done in dark-Phosphorescence.
Black P.P. of Phosphate. Old match S + P. Safety M. $KClO_3 + MnO_2$.
Compounds of Phosphorous. Phosphor + H. PH_3 \rightarrow Phosphine. Prep: .
 $1.5 NaOH + 4 Ph. \rightarrow 3 NaHPO_2 + PH_3$. Properties: 1. Gaseous. takes
 fire spontaneously in air. 2. Collected under water. 3. Sparingly sol in alk.
 4. In organic Comp. containing Ph. Decomposing under water
 gives as impure Phosphene. this comes to surface & burns. forming
Squis fatus or bill of the wisp: $P + \text{Halogen} \rightarrow \text{combines with alk.}$
 $P + O \rightarrow P_4O$ Phos Monoxide P_2O_3 Phos trioxide. P_2O_4 Ph tetra.
 P_2O_5 Ph. Pentoxide. Acids of Phosphorus. Hypophosphorous acid.
 H_2PO_2 Prep: $1.5 Ba(H_2PO_2)_2 + H_2SO_4 \rightarrow BaSO_4 + H_2PO_2$
 $Ba(H_2PO_2)_2$ = Calcium Hypophosphite. $Na H_2PO_2$

Phosphorous Acid. H_3PO_3 Prep: $P^{th} PCl_3 + H_2O \rightarrow 3HCl + H_3PO_3$. Salts are called phosphites. H_3PO_4 Phosphoric acid.

Prep: $P_2O_5 + H_2O \rightarrow 2HPO_3 + 2H_2O \rightarrow 2H_3PO_4$ Ortho ... acid.

2. Boiling $P + HNO_3 + H_2O \rightarrow H_3PO_4 + \dots$

Salts of Phosphoric acid. 3 series. Normal salt. Na_3PO_4 acid salt. 3. Double salt. Mg. NH_4PO_4 triple Phosphate.

Properties of Phosphoric acid: Colorless. nonfuming. strong acid. 2. 85% absolute acid. 3. Sol. in water. 4. Sp. gr. 1.707

Chem. Prop. Heat $2H_3PO_4$ loses $H_2O \rightarrow H_4P_2O_7 + H_2O$. Heat $2H_3PO_4 \rightarrow 2HPO_3 + 2H_2O$ Pyrophosphoric, or meta Phosphoric acid. glacial Phosphoric acid.

Arsenic: At. W. 75 - mol. W. 300. occurrence 1. As_2S_3 orpiment

2. Realgar As_2S_2 3. Cobaltite. Co As_2S_4 4. mispickell Fe As_2S_4

Prep: 1. Heating mispickell in clay cylinders & condensing. gives As_2O_3

2. Heating As_2O_3 + Charcoal & distilling off

3. Distill from Fe S_2 , As_2O_3 , Fe (arsenical pyrites) = $As_2 + 2FeS$

Properties of metallic arsenic.

1. Brittle steel gray metallic lustre.

2. Exists as amorphous - iron lustrous & malleable.

3. At higher temp. yellow form.

Chem Prop:

1. Insol in water.

2. Sublimes.

3. Vapor has yellow color, garlic odor.

4. Heated Burns with blue flame. $\rightarrow As_2O_3$.

5. Combines directly with most elements.

6. Combines with H. only when H is nascent.

7. HNO_3 , H_2SO_4 dissolve it without forming salts

8. $NaOH$ + As \rightarrow arsenite

Uses of arsenic:

1. Used in fire works - Pyrotechny.

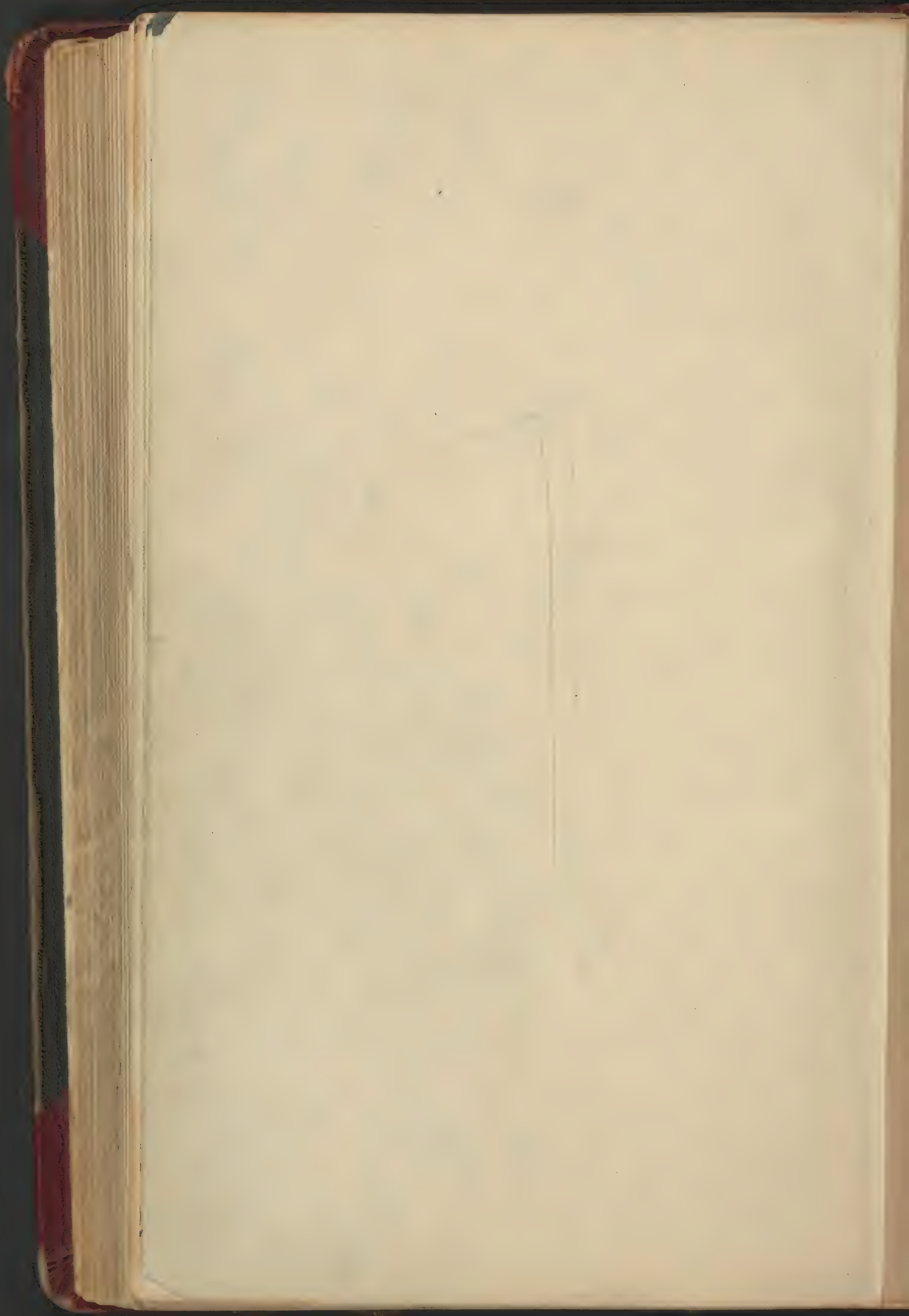
2. fly paper.

3. Poison on rats.

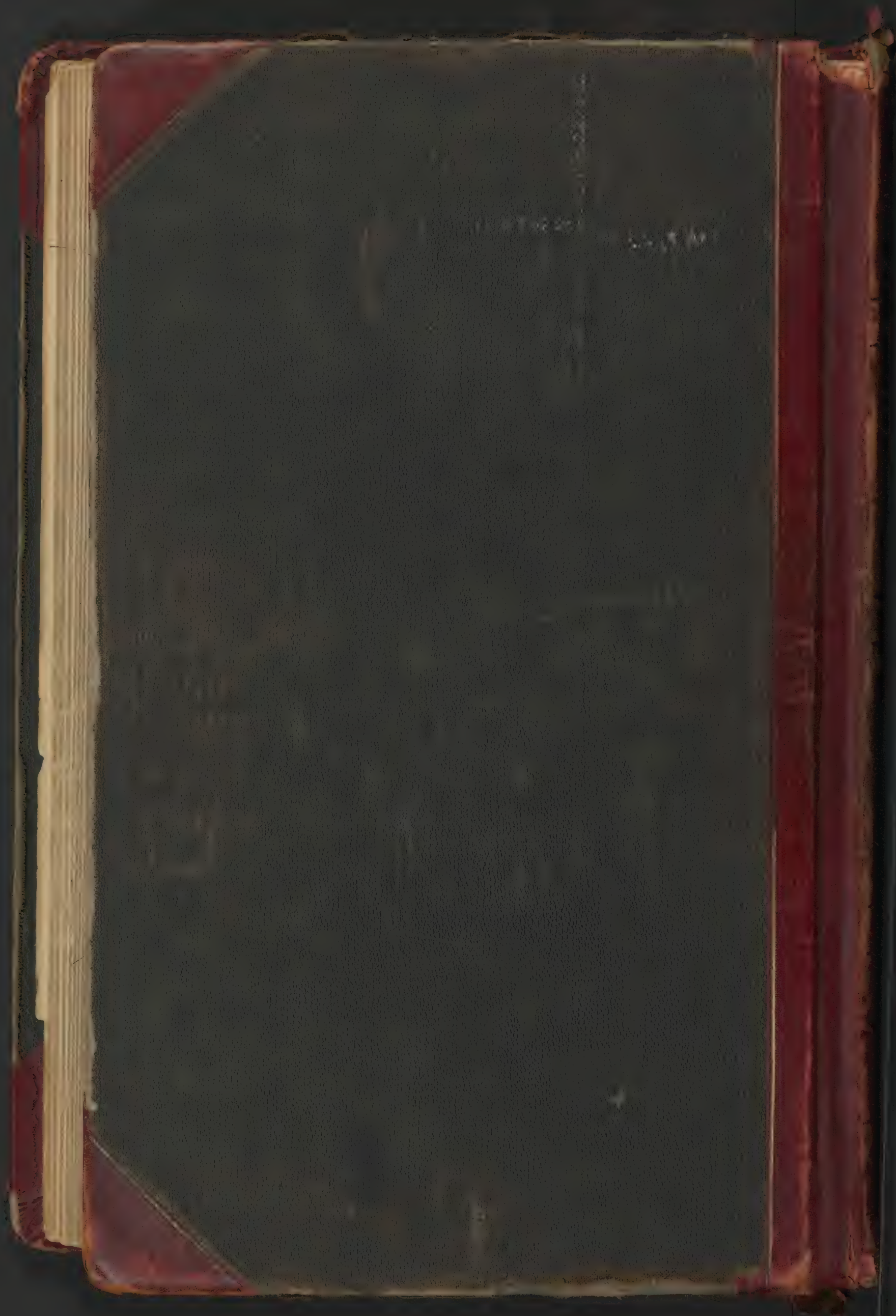
4. Shot-making.

5. Used extensively in medicine.

- 28 Therapeutics - Prof. Friedman.
 143 Physical Diagnosis - Prof. Summa.
 200 Medicine - Prof. Crandall.
 280 Medicine - Summa.
 340 Chest Diseases - Jensen.
 240 Surgical Pathology - Kutz.
 100 Clinical Chemistry.
 300 Parasitology. Johnson.
 365 Obstetrics - Prof. Ehrenfest.
 160 Physiology - Prof. Lyon. Skin. Duncan.
 60 Quiz Work Friedman.
 380 Ouncology. - Laish, Dorsett.
 400 Eye. - Barck.
 420 Fractures & Dislocations - Mc. Candless -
 313. Embryology. Wilson.
 430 Nerve Diseases, Schwab, Graves, Chaddock.
 450 Children's Diseases. Atkinson & Clemens.
 475 Ear, nose, & Throat. Goldstein.
 420. Ry Surgery. Fairbrother.
 109 G. M. Lewis.
 315 Surgery. Geiger & Nicholson.
 57. Electro Therapeutics.
 490. 425. Chemistry. Dr. Neilson.
 372-392 Obstetrics. Dr. Hypes.
 160. Skin - Dr. Duncan.
 118 Dietetics - Dr. Neilson.



508, 100 March.
Cestus Sp. (p. 100)
Cestus P. (p. 100)
(Lophthoria ag.)



Attendant Duties of Med. Off.

minute surroundings finger marks &
keep diary. Memorandum.

Preserve History.

Death by violence: Exact time.

attitude. Position & Cond. of Body. Dress.

all surroundings. Photograph.

Vomited Matter. Expression of face etc

marks of violence. Progress & Dissolution.

i. M. Preserve Stomach Examine Contents.

Observe Contents of Intestines.

Cond. of Windpipe. Throat. L. & R. H.

genital organs. Remove & label.

Examine for disease.

Adrenals. wgt. 10 gm.

cortex & medulla

Intermediate zone belongs to cortex.

Cortex - columns of cells. containing glistening granules of lipid character.

medulla - contains numerous nerves & multipolar ganglion cells. & nests of cells, stained brown with chromic acid - & are called chromaffin cells.

arteries - from Diaphragm-aorta & Renal - Branches anastomose & form a network subcapsular & pierce thro cortex & form cap. network in the medulla.

accessory chromaffin cells & tissue are found. on Carotid artery in gang. of Sympathetic trunks & Solar Plexus. Superior Mesenteric & along course of Sympathetic nerves. Total emb. Extra medullary tissue is equal to med. part.

Cortical substance can be found in hilus of KD. & in KD & in Internal genitalia

Phylogenesis. There are two independent systems -

The chromaffin or adrenal system is of Ectodermal origin & is part of sympathetic Cortical system - interrenal system - develops from ventral part of mesoderm.

Clinical knowledge with regard to pathological conditions of the ad. gland has, unfortunately, not yet ~~been~~ been joined to the facts established by Physiological research with such happy completeness as to give that reward which all workers ardently desire, the power to control & check disease.

Cortex of gland. small in encephalic

secretion of adrenalin by glands is controlled by Sympathetic Splanchnic Symp. nerves. & the secretion is a stim. to all plain muscle supplied by Symp. system & these muscles are maintained in a certain tone by ad.

The cortex is not controlled by nor related to the nerves.

Have to do with supplying the secretion which influences the growth & reproductive power of the animal.

suprarenal cortex & sexual glands are laid out in
Wolffian duct & have origin in that place of Colonic
epithelium from which the sexual glands originate.
This early separation of the two systems becomes
nil as the development of the glands occurs & both
systems give way to a nearly common function.

Addison's Disease 1855-

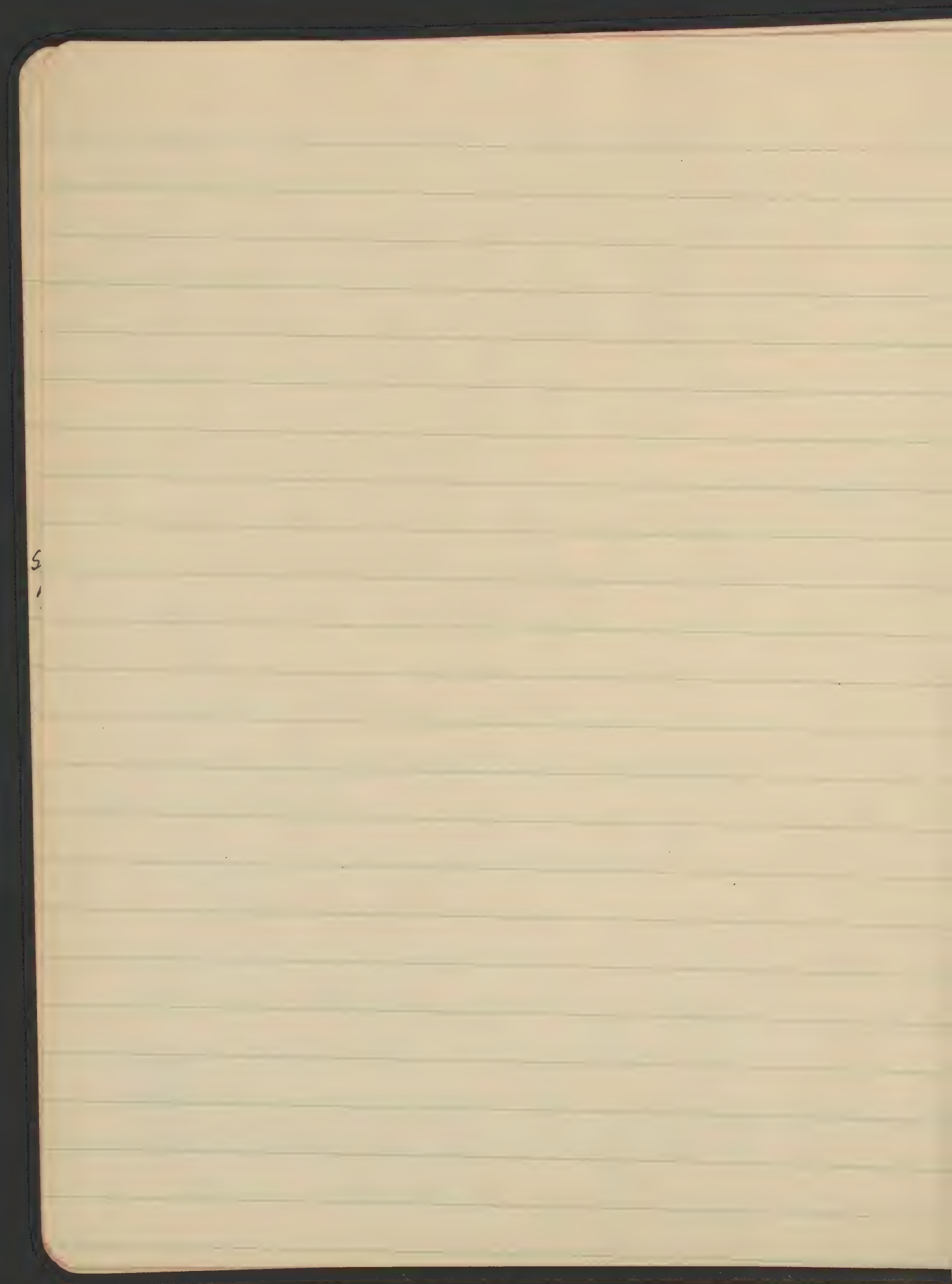
Develops in 3rd & 4th decades quite insidiously with
adynamia & apathy. Constipation. Pigmenting
of skin & mucous membrane. Pts. succumb
under increasing cachexia - at times with
stormy terminal manifestations. Autopsy
shows disease of both adrenals usually caseous. T.B.C.

Peracute cases of haemorrhages & death within a few days
with stormy cerebral symptoms & Intestinal
Chronic cases may show remissions.

Path. Anatomy.

Congenital malformations with other malformations
may exist.

Hypoplasia of Chromaffin tissue is sometimes
associated with status Lymph. & Great Parenchymal
Value of Thymus. This condition makes
susceptible subjects.



Path. Anatomy

Haemorrhage & Thrombosis are found / Suprarenal Veins.
with resulting destruction or suppuration
also atrophy & sclerosis - causes shrinking
& coalescence of adjacent tissue.

Micros. Reduction of Parenchyma. fattening &
necrosis of cells. Thickening of Vessels in sclerosis.
granula have been found.

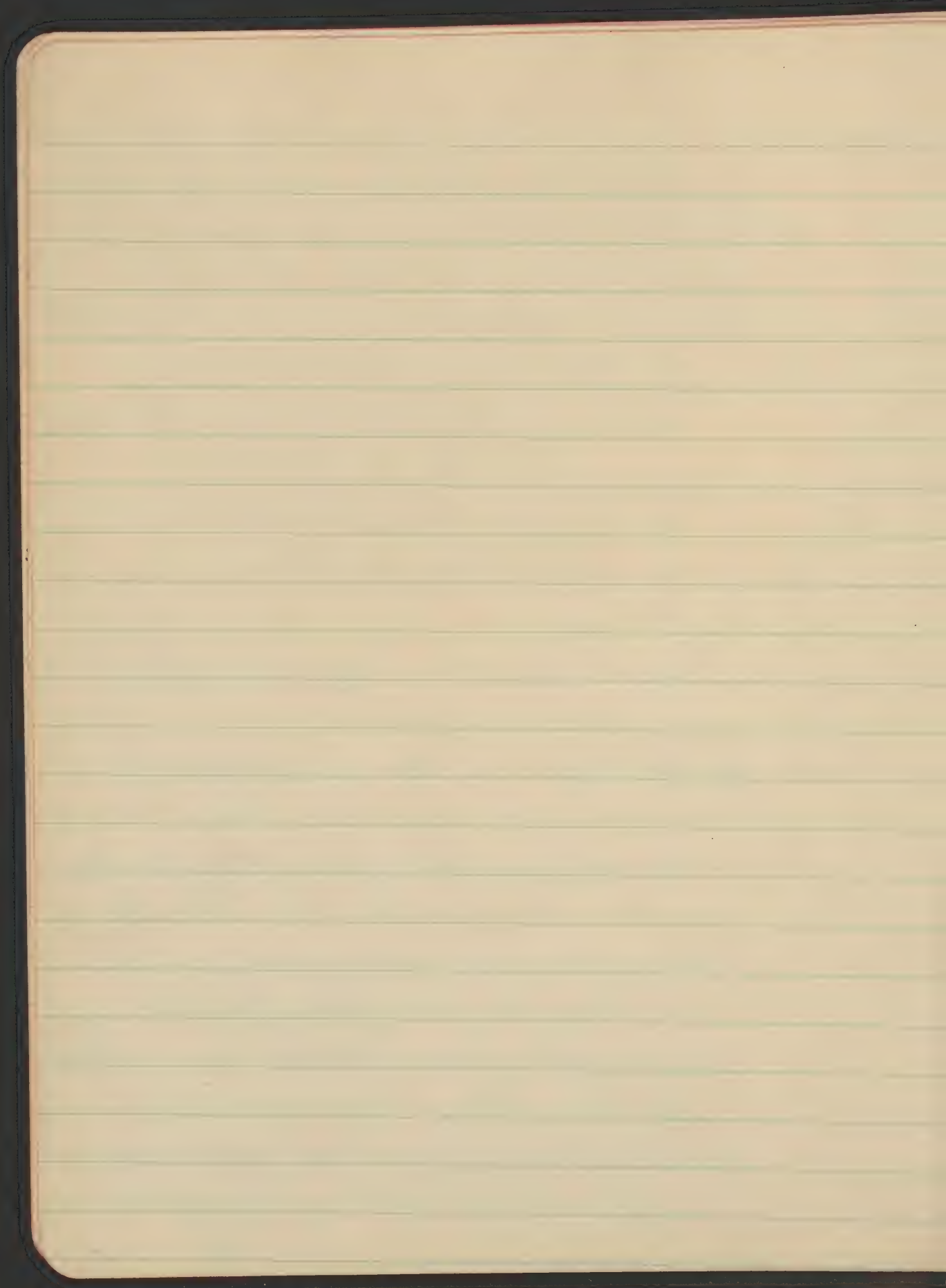
T.B.C usually Bilaterally. 17% of 49 cases
Primary & 48% associated with Pulmonary &
other foci.

Tumors. may destroy suprarenals. Hypertroph.
may show Addison's disease.

Healthy adr. have been found in Addison's & Destroyed adrenals
found without Addison's disease. showing the
existence of compensatory tissue of same function.
also the result of deficient secretion depends upon
the secretion value of outside tissue.

Destruction of the entire chromaffin system
has been noted in some Addison cases.

while cortex was less involved. Destruction
begins in chromaffin & secondarily affects Cortex.
Recent work shows both systems affected.



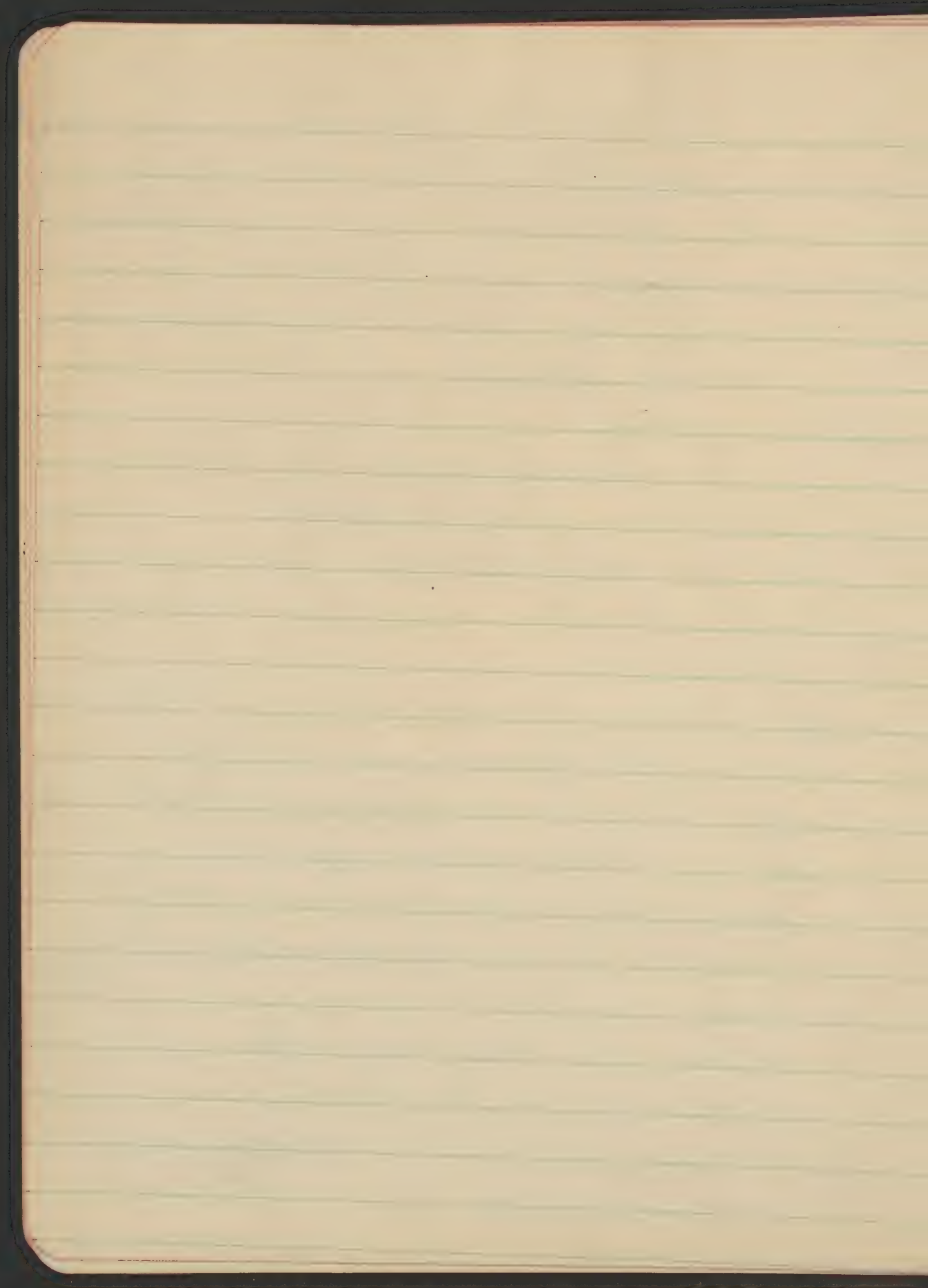
atrophy of Heart & Sexual glands usually present.
The Suprarenal becomes affected in severe infectious diseases
& intoxications. Diphtheria toxin has an especial affinity.
may show haemorrhages in animals after Diph. Toxins
An Insuf. of Supr. Renals is an important cause
of Cardiac Insufficiency.

Pathological Physiology

Brown-Séquard's thesis that extirpation
of both glands caused death has been disputed
Beidel showed that death was not due to Sympth. nerve plexus
shock as the operation ended fatally after Transplant.
ad. under skin.

after Extirpation - after latent period animals showed
increasing apathy & dynamia, paresis & emaciation
Weight & Temp decreased as did Sugar content of Bld.
Injection of Phloretin produced no glycosuria.
glycogen rapidly disappeared from liver & muscles.
& there existed a higher sensitivity for poisons. Bld seemed toxic
Death in convulsions.

We know not yet which symptoms of Addison's are due
to cortex lack or lack of Medullary Sub.



chromaffin tissue active principle is adrenalin
action:

Powerful increaser of Bld. Pressure. thro. narrowing
of Peripheral Vessels. slows then accelerates pulse.
slows by Reflex excitation of Vagus center - so called
by activities of adrenalin - also by activities are shallowing
of Resp. & the excitability of striated muscles.
Relaxes stomach & Intestines contracting agent
on three sphincters.

mydriasis occurs under circumstances.

Diuresis by Dil. of Vessels/Kid. Salivation & secretion
of tears may occur. produces Hypoglycaemia
& glycosuria by mobilization of glycogen & by
secondarily increased carbohydrate formation in liver.
Resp. quotient temporarily inc. Produces ^{neutrophilic} Hyperleucocytosis.
Above are accessory actions.

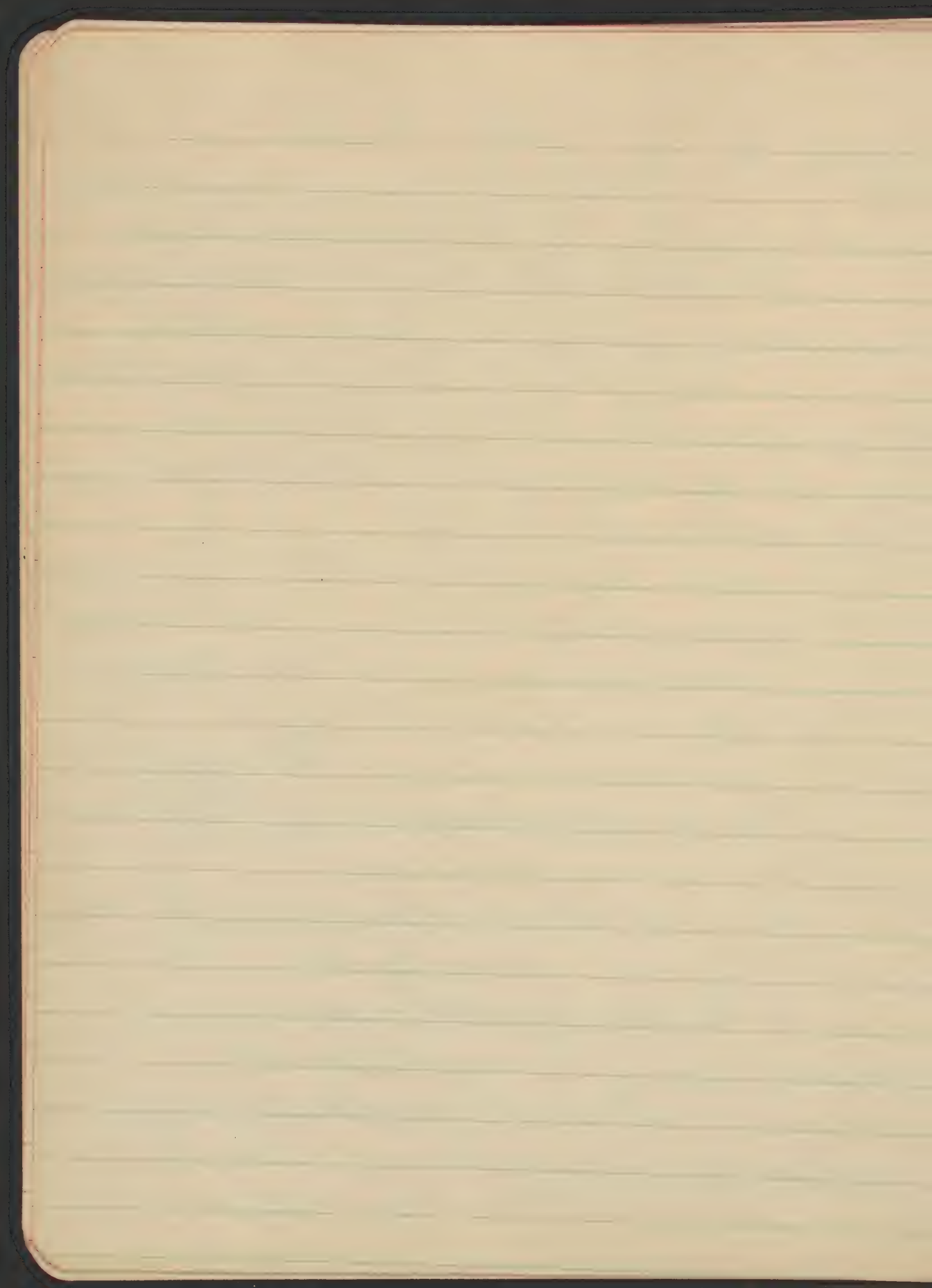
apart from above action is on the purely sympath. nerve
endings so called musculo-neural function.

It is therefore purely sympath. Harmonious.

Adrenalin is continuously supplied to Vena Cava.

The supra-renal vein contains $\frac{1}{2}$ part per. million of adrenalin per c.c.

In 24 hrs. 4.3 mg. are given to Bld.



Thus that the activity of Chromaffin tissue & the excitability of Myoneural junction was regulated by centers in the Medulla since puncture of glycemia is brought about dissemination of ad. from Chrom. system.

Puncture of Dog without Thyroid had no effect also there was no effect in dog with adrenals removed after puncture the ad. Medulla took less chrome stain & contained less adrenalin.

cutting of splanchnic nerves. prevents this and also glycemia is prevented.

Path of adrenalin in Bld. Stream:

Portal Vein Inf. Vena cava. Lungs

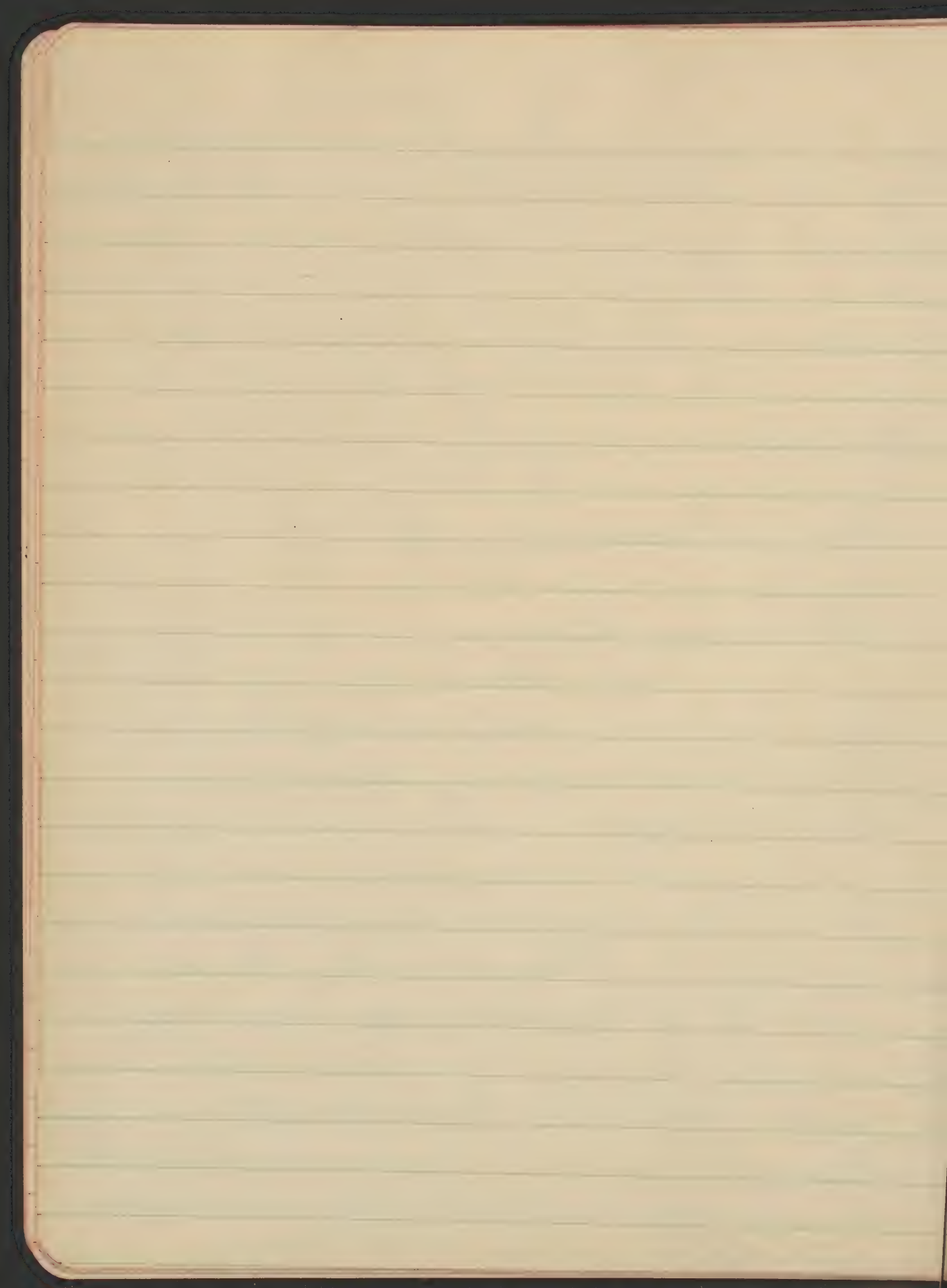
Systemic Cir. most is used in Muscles & Intestines - Increased amt. produces Hyperemia of Vital organs. Liver Brain Heart & Kidneys.

Especially favorable conditions seem to exist in the liver for the action of adrenalin on Metabolism.

The assumption is that Adrenalin maintains the normal excitability of the Sympathetic nerves & by means of a graduation of the secretion it is concerned in the regulation of Bld. Pressure & the distribution of Bld.

It maintains the tone of all organs supplied by Sympath.

It maintains the sugar content of Bld. & influences muscular power by sugar regulation & influences Neutrophilic Leucocytes



Function of Cortex.

contains an oxydase. & cholin.

Cholin acts as a toning agent on the auto-nomous nerves.

& is found in other organs.

whether this is an antagonistic regulation against the chromaffin system is questionable.

It is assumed the the cortex possesses a detoxicating function. as animals seem poisonous when adrenals are removed.

This may be due to disturbance of regulator function thereby lessens resistance.

Influences are noted on sexual development.
from cortex function.

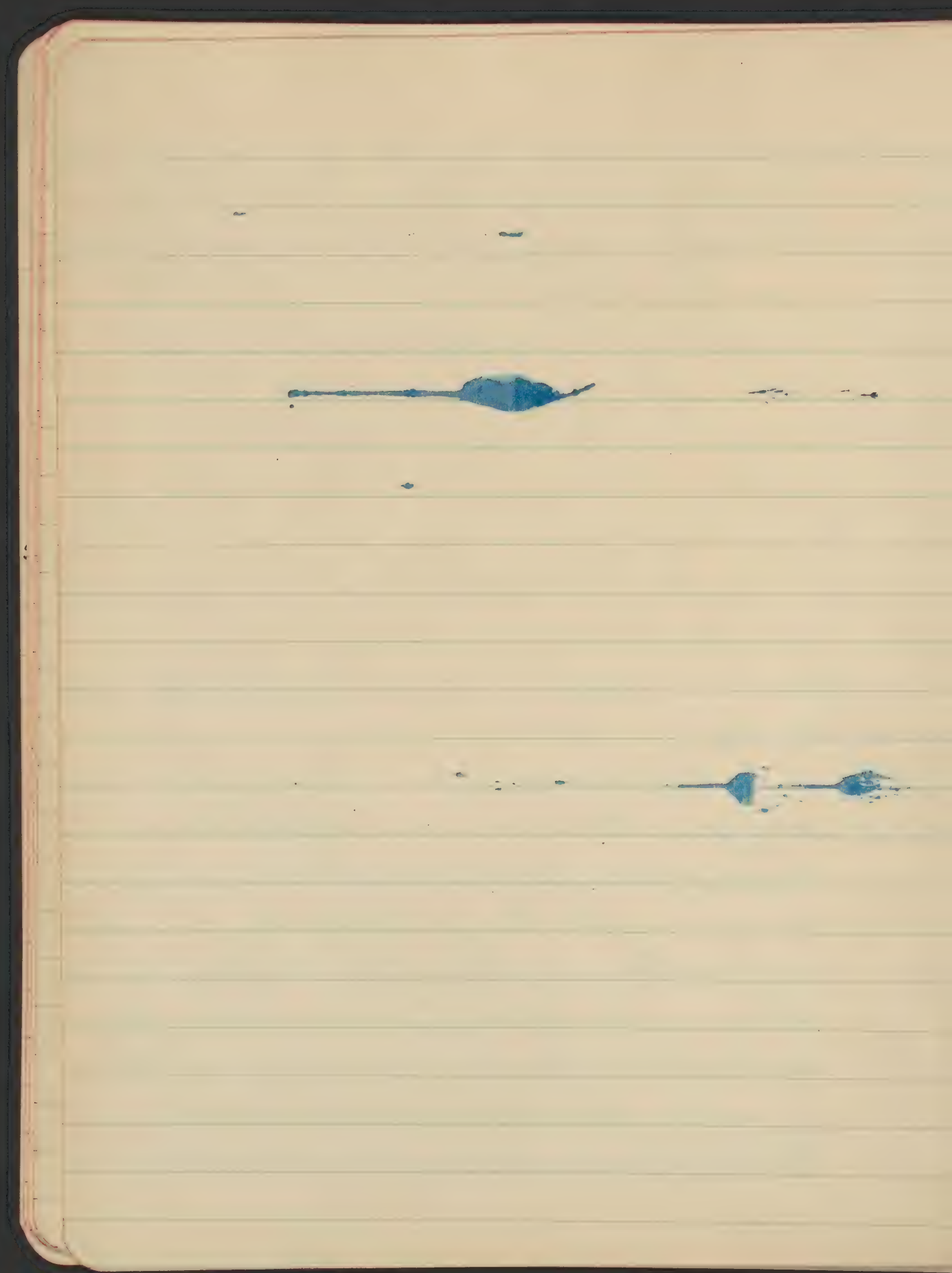
Pathogenesis of Addison's Disease.

Add. Disease depends on an acute or chronic more or less ^{complete} loss of Function of the Suprarenal apparatus.

Perhaps from youth there is a weakness.

There is usually found pathology in the ad. system yet there may be an affection of the nervous mechanism regulating the ad. apparatus.

If one gland is diseased there is a reflex affection of the other side as anemia sometimes results.



The symptoms depending on lack of function of Chrom. System,
are: low Bld Pressure.

low Bld sugar content.

High tolerance of grape sugar

Adynamia.

Mononucleosis. or ~~status~~ lymphaticus.

Tuberculosis associated.

Symptoms depending on lack of Cortex symptoms are,

Vomiting.

Diarrhoea.

Psychical dist.

Convulsions.

Delirium Coma.

Iron Free pigmentations are difficult to interpret.

Pigment found in Basedow's when there is inc. ad.

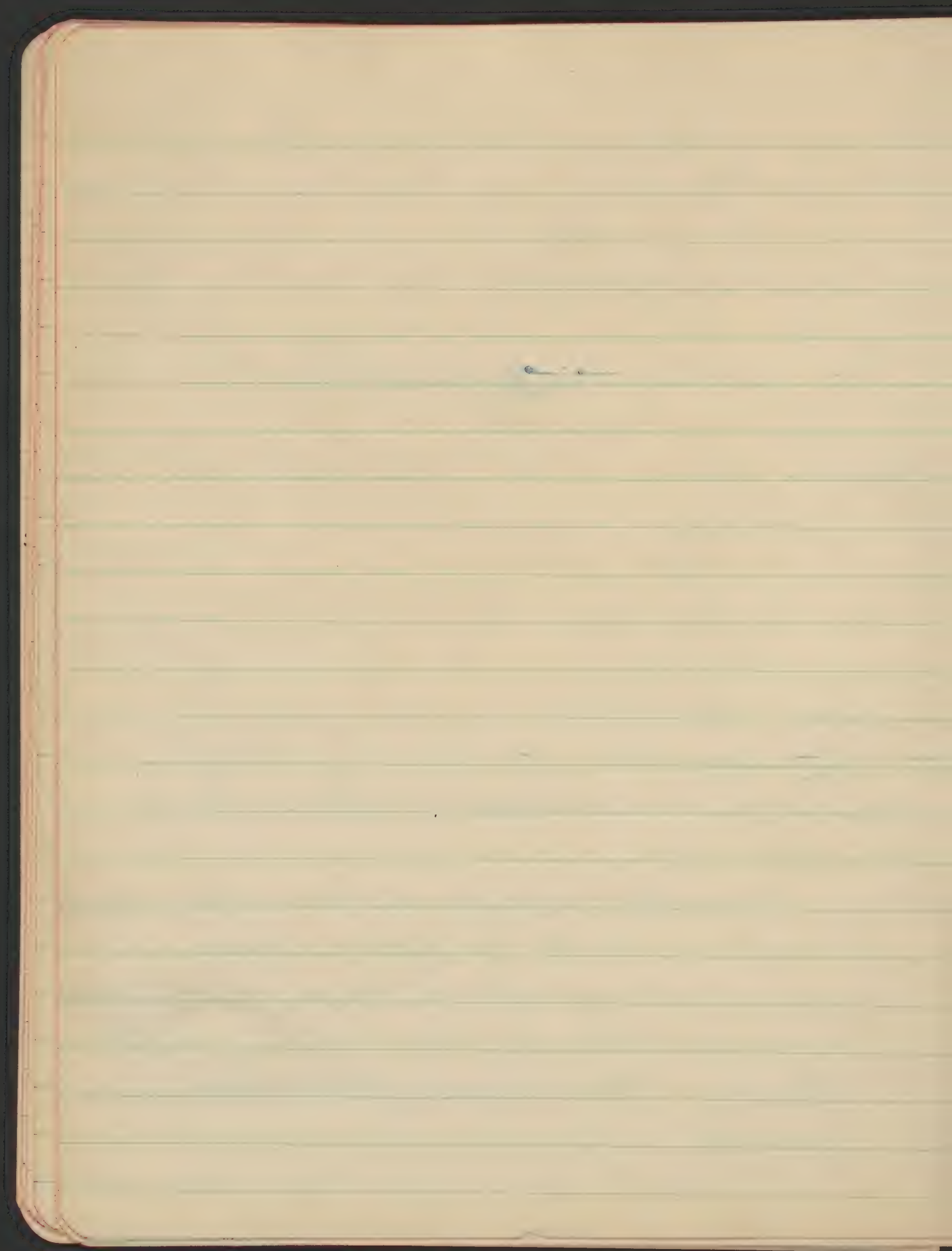
Differential Diag.

Pigmentations are very frequent. especially in
mucous Memb. where T.B. & other affections. Pregnancy

use of arsenic & Chronic Hb. disease there are no pigmentations
on mucous membranes. Also Bronch. Diabetes Pigment on M. Memb.

Scleroderma. Pellagra. Leucemia. Basedow's disease

Carcinoma.



Hypoglycaemia - mononucleosis with hyper eosinophilia
are important in Addison's.

Extraordinary slowing of Tense pulse - violent intestinal
colic occurring in attacks, failure of intestinal
peristalsis and localized intestinal distension.

Prognosis.

always dubious. Lethetic cases get better.

Removal of one T.B. Supra Renal gland. led to a cure.

Treatment.

adrenalin should not be continued

Excitement. Tremor & insomnia may occur.

Wash Stomach. with Sodium Cl.

Vegetable diet. avoid alk. & HCl. acid. medication
avoid severe exertion.

Large amts. sugar should be given.

Use of Adrenalin in Therapeutics.

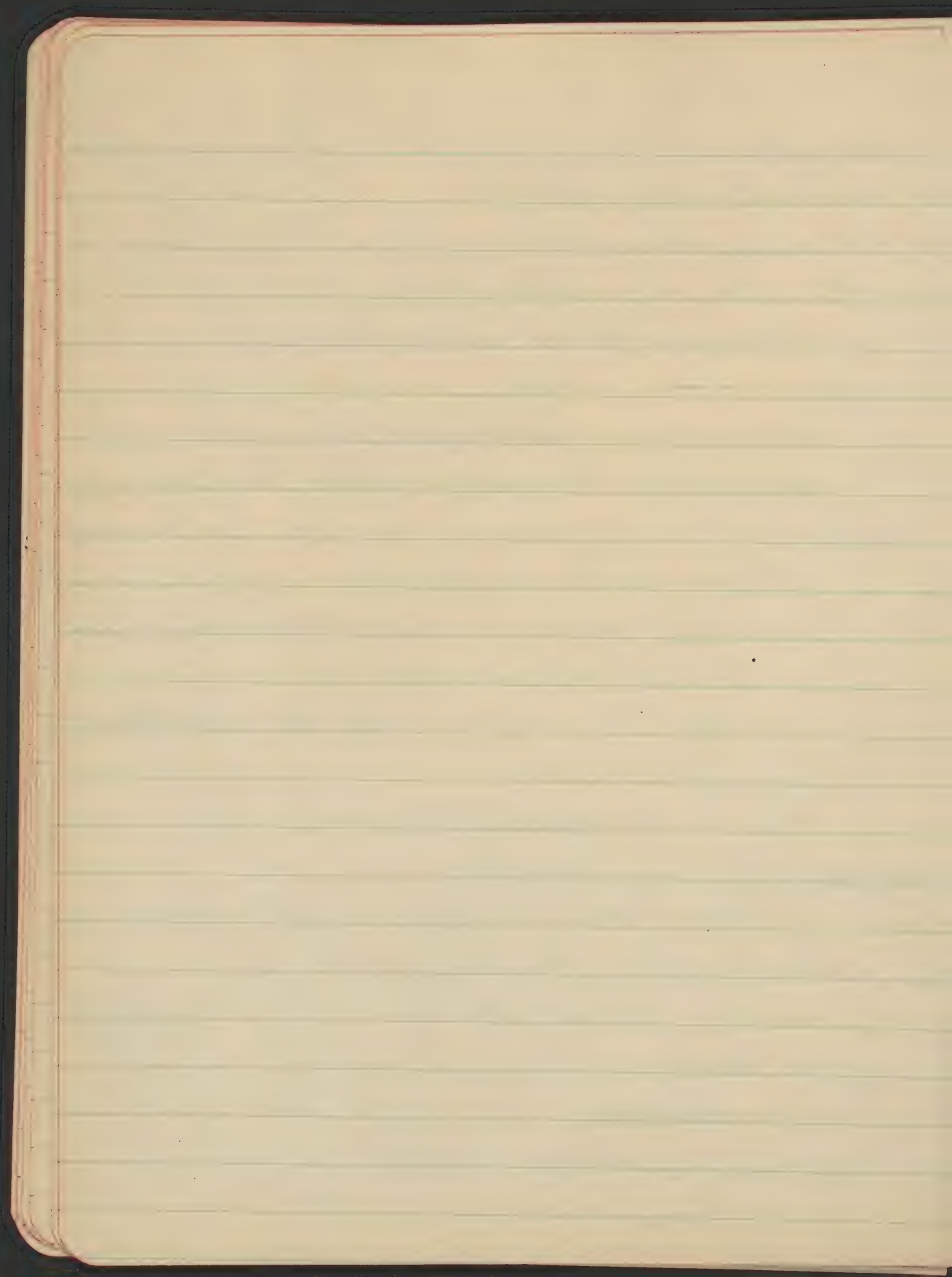
In stopping Haem. In collapse in infectious diseases.

In obstructed Esophagus. by mouth.

In Obs. contract uterus.

In phosphorus poisoning

Osteomalacia.



Symptoms due to Failure of Function of Suprarenal Cortex.

Symptoms of Addison's, of Intoxication in acute &

Terminal cases are supposed to be due to lack of cortex.

Aplasia of Suprarenals. the aplasia of Cortex is
the more important

At Birth there is aplasia of cortex with
Suprarenals well developed.

In Adenomata & Hyperplasia of Cortex there
occurs in youth abnormal growth of the organism

& premature development of secondary sexual
characters, & the genitalia. In adults an

unusual hairiness. In opposite conditions

there is belief in existence of cortical insufficiency

In case of Hypophyseal dystrophy in later life
with marked retrogression of hairiness on face

& Trunk. both Suprarenals were sclerosed

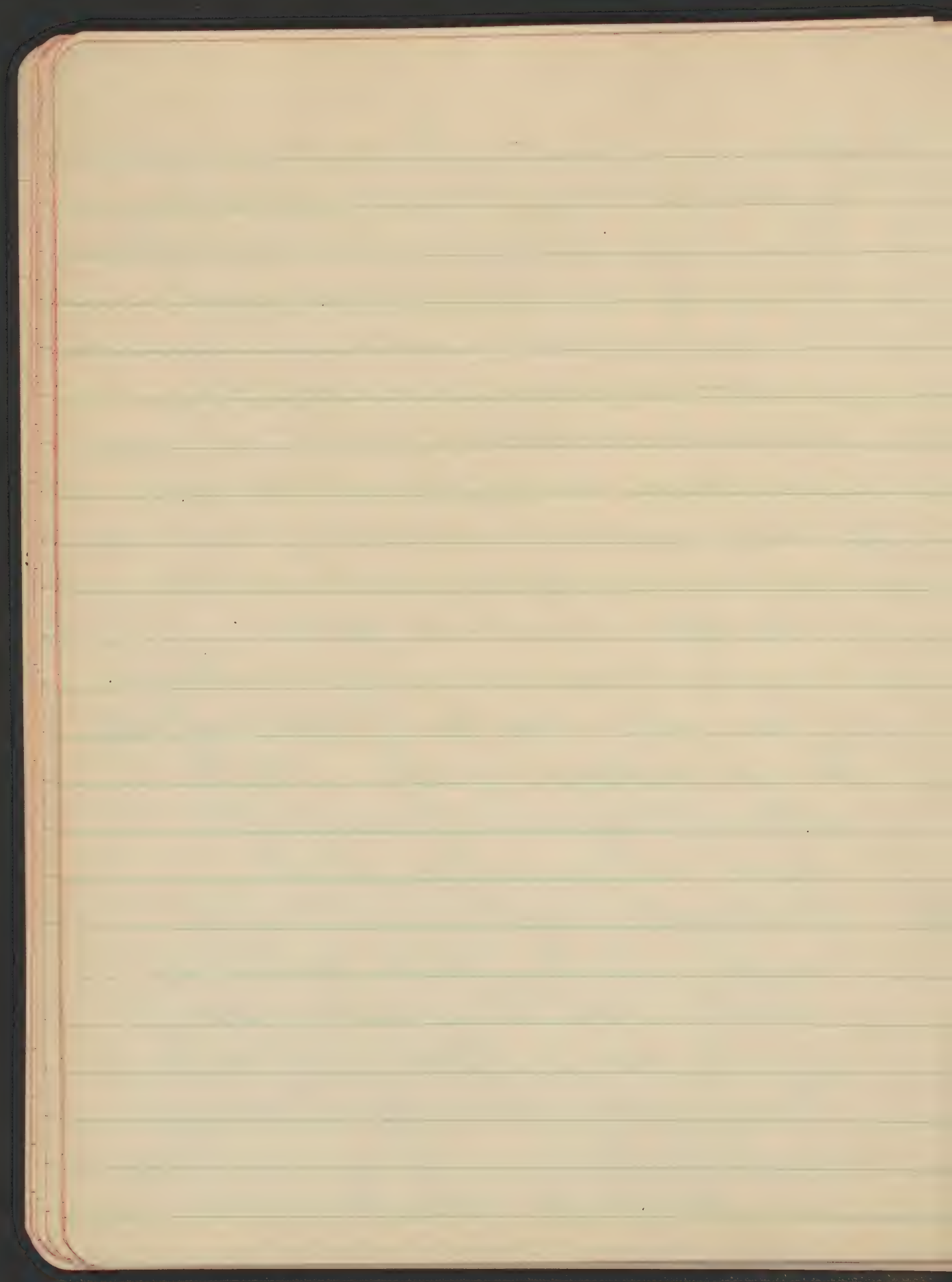
The retrogression of secondary sexual characters

may set in as result of failure of sexual glands
especially in men. In women the mere loss

of sexual function is not followed by loss of hair etc.

This occurs first in cases where there is sclerosis
of multiple glands.

In multiple glandular sclerosis there is found
marked sclerosis of cortex of Suprarenals.



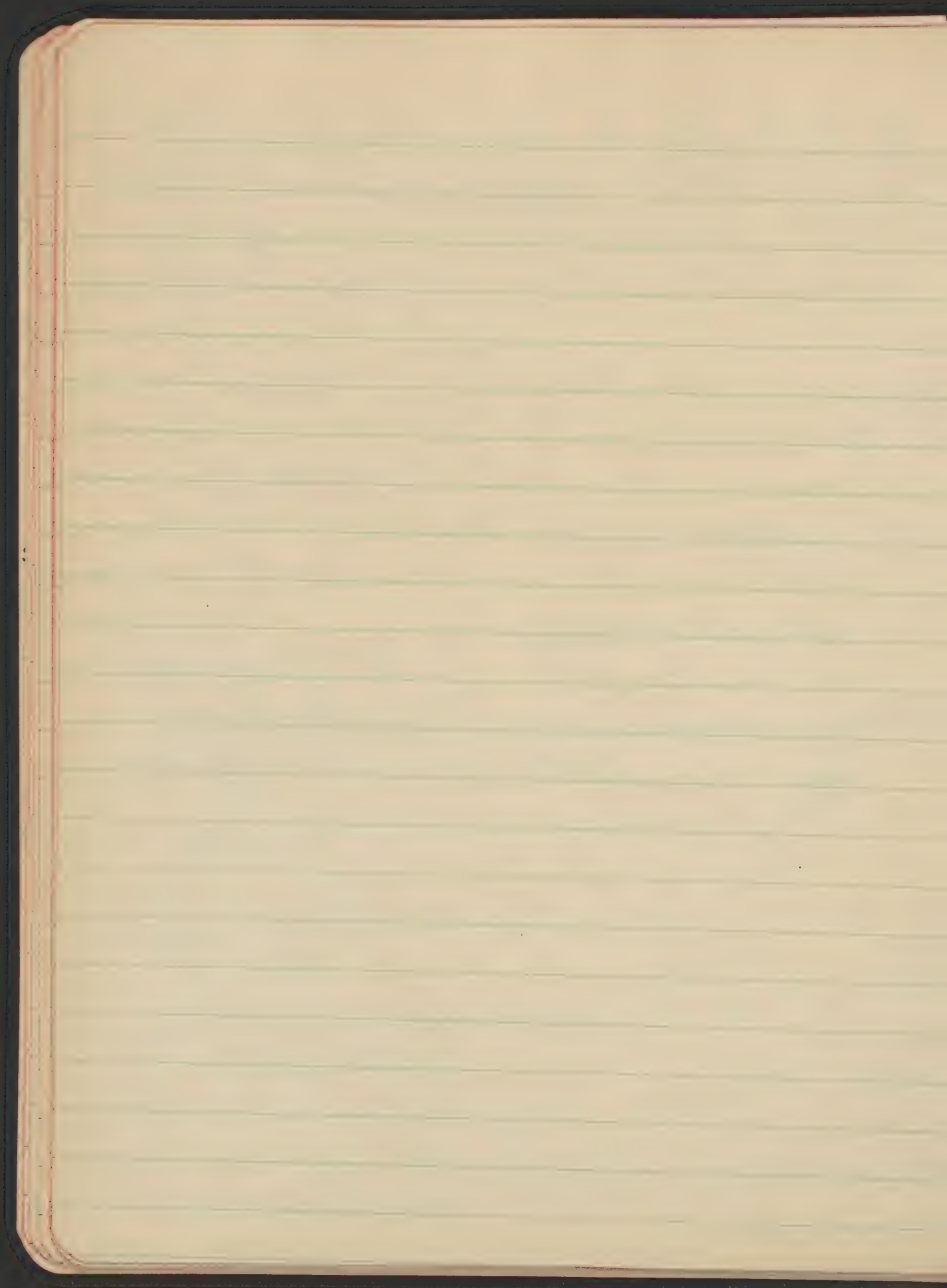
In Echinoidism in addition to Hypoplasia of sexual glands there is a Hypoplasia of Suprarenal cortex. From the cortex there proceeds a furthering influence on the genital sphere especially the hairiness.

Hypofunction of Suprarenal Apparatus.

Tumors usually produce hypofunction.

Cocaine anaesthetic use for Tooth Extraction in healthy man produced sudden death. P.M. showed double Suprarenal Tumor rich in adrenalin death due to adrenalin poisoning.

In Tumor of Sympath. in 2 yr. old there was found arteriosclerosis similar to that produced by adrenalin. Hence it seems that Tumors can produce Hypofunction.



Pituitary Body.

Marie in 1888 wrote of acromegaly & Pituitary tumors which stimulated modern investigation.

Body consists of 3 parts

1. Pars Anterior or Pars glandularis.
2. Pars Intermedia
3. Pars Posterior or Pars nervosa.

1 is derived from Ectodermic wall of Buccal Invagination

3 is downgrowth of Thalamencephalon.

Anterior Portion - glandular - made up of network of epithelial threads & columns interlined with thin walled Bld Vessels.

Intermediary portion is fine granular cells almost devoid of Bld Vessels. This layer contains some colloid but no Iodine.

The Pars Nervosa - Post. - is composed of neuroglia of primitive type & contains granules & masses of hyaline substance derived from Pars Intermediary & contains pigment cells & granules.

Physiology.

Injected Extract raises Bld Pressure more lasting than ad.

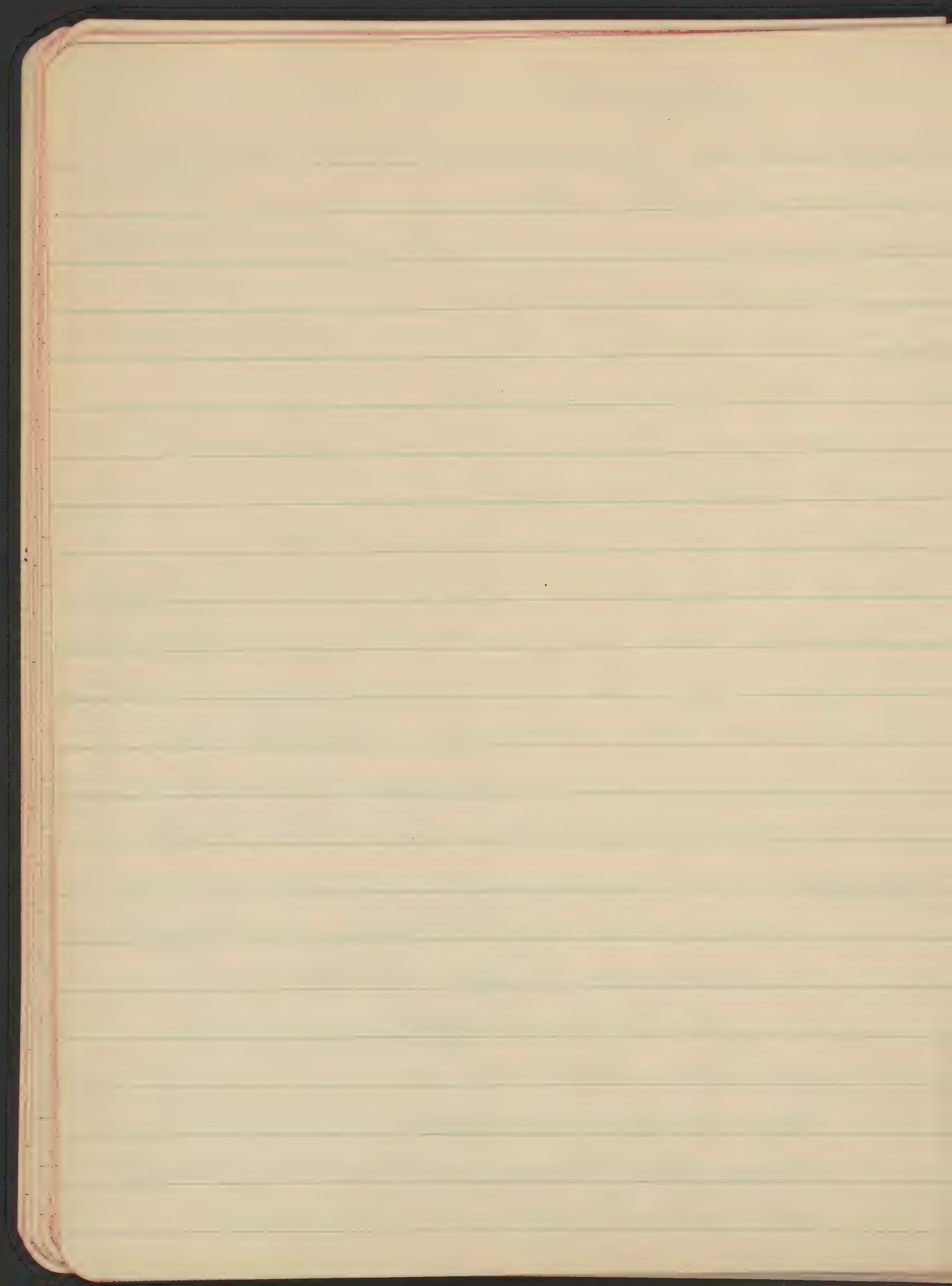
This extract action comes from Post Lobe.

Stim. of gland produces same effect.

Heart rate is slowed.

Second & third doses lower pressure.

Pressor effect of Pituitary is not due to stim of adrenalin system. but due to direct action on Heart muscle.

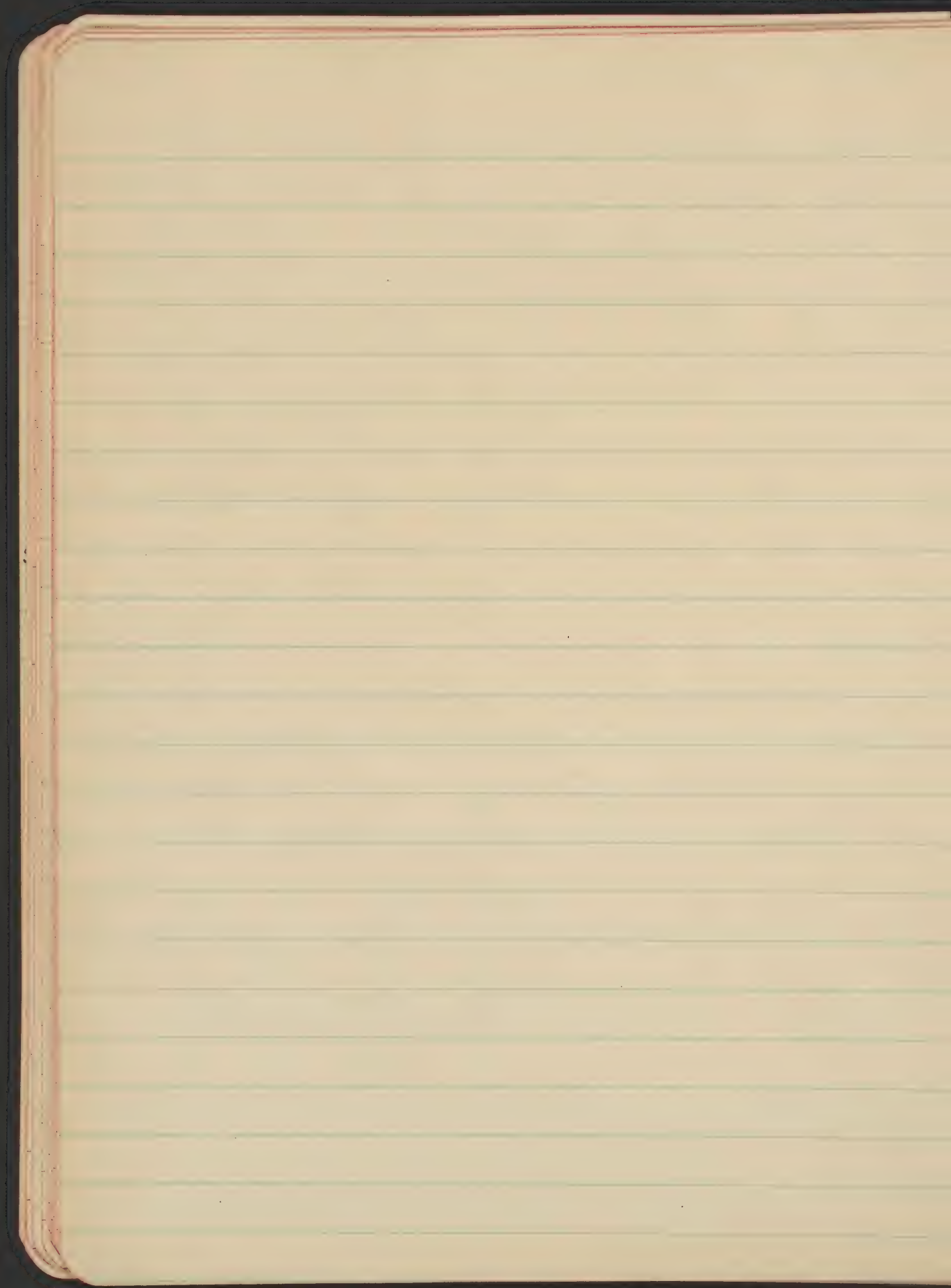


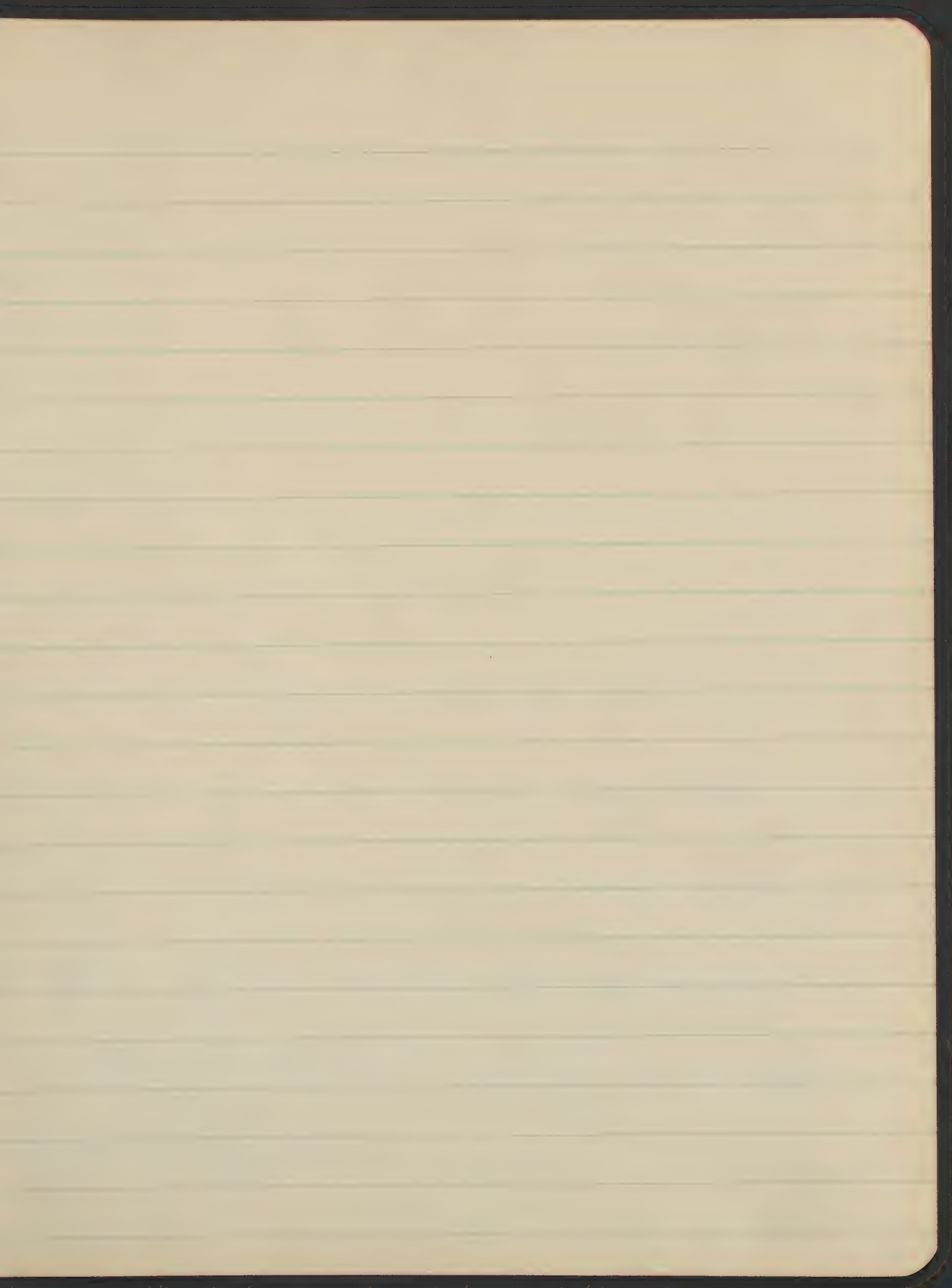
There is peripheral Vagus stimulation & slowing of Resp.

There is extreme sensitiveness of Uterus to Pituitrin

Bladder is stimulated & contracted.

Restores Intestinal Peristalsis.





methods } Exam. Nervous System:

1. Mentality

2. Reflexes.

3. Sensation. - muscle strength.

4. Pupils

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Disturbance of Intell.:

Imbecility.

B.T.

Paralytic Dement.

Mult. Sel.

Haem. & Softening.

Tremor:

Mult. Sel. - intention tremor.

Paralysis Agitans.

Senile.

Gout. Exop.

Toxic Pb. Mg. Morph. alc.

Physiologic - over exertion.

Ataxia:

Locomotor ataxia.

Friedrich's ..

Cortical .. (B.T.).

Neuritis alc.

Mult. Sel.

Pain:

(a) Parenchymatous.

(B) Neuralgic.

(a) Irritation at terminal points.

(B) Trunks.

Neuralgie:

Localized, more severe, fatigued, remissions.
Tabes, Joint Rheumatism, Syphilis.
Diabetes. True Neuralgia.

Parenchymatous:

Organic Visceral disease. Headaches of Meningitis.
Intracranial pressure. Toxic febrile Dyspepsia.
Anemic Headaches, Migraine, Neurothemia.
are not localized.

Coordination:

affected by sensation - ataxia.

Reflexes:

Spinal.	Spinal	} Salvi.
Cerebral.	Cerebrospinal.	
Complex.		

Spinal:

Tendon; Joint; Periosteal.

Cerebral:

Cutaneous; Abd; Cremasterics; Eye; Plantar etc.
liberated by special sensation.

Spontaneous tremor, not so constant.
more on paralyzed side.

Complex:

Sneezing; Smell; urinating; def; swallowing.

Cerebro-Spinal.

Cortex discharges lower arc.

May be damping effect.

May be new formed reflexes.

Lesions retained abd. & Crem. good sign.

Permits discharge affect. - not complete injury.

Reflexes

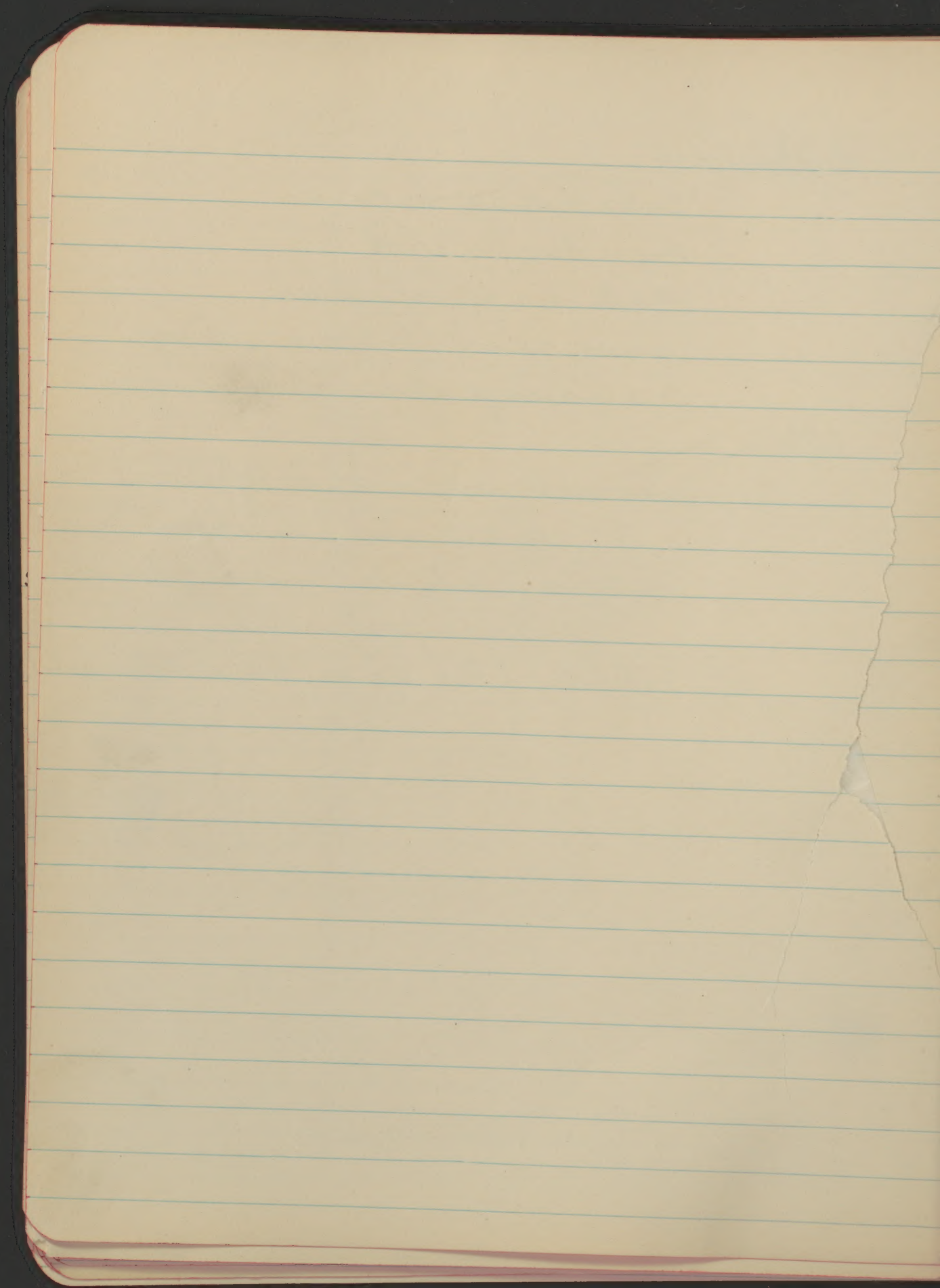
Increased: by irritation of lower reflex arc.

By destruction of inhibition.

Irritation of Inhibitors causes weakening.

Tabs. Peripheral neuritis.

Inhibitory fibers are in lateral columns.



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Stomach Indications for Operation:

1. Uncontrollable diffuse Haem.
(30% ulcers die in Haem attack)
2. Rapid loss weight. (no other cause).
3. Dilated atonic Cond.
4. Obstruction - Benign or otherwise.

Post gastro-Enterostomy.

- a. Ang. of Trite.
- b. Invert Peri. expose stomach
- c. Replace all but parts used.
- d. Resect for Malig.
- e. Always loosen adhesions. app. etc. q.B.

Benign Obs:

1. Sarcinae - yellow Cotton Bales.
grow only in rel.
Don't wash first.
Large & Small - are digg.
2. Vomit large amt.
3. Dilatation.

Lactic acid B.

Lugol neg.

abd. Paralytic. (Poor Intrauterine development)

1. Long.
2. arch acute.
3. misplaced organs.
4. St. Verb.
5. Colon U. shape
6. atony. Constipation.
7. Fl. R. Kid.
8. Fl. 10. Rib.

Umb. Hernia:

May be small.

Cause severe st. trouble.

Cramps.